

CHANGE OF OWNERSHIP OR ADDRESS FORM

PLEASE COMPLETE ***ALL*** INFORMATION BELOW

|  |  |  |
| --- | --- | --- |
| Assessment No: | | Owner Code: |
| Names in Full: | | |
| Property Address: | | |
| Postal Address: | | |
| Email Address: | | |
| Phone No: | | Date: |
| Signed: ***(All owners must sign)***  ***1)*** | ***2)*** | |