

CHANGE OF NAME FORM

Area(s) change relates to: *tick appropriate box*

Rates <input type="checkbox"/>	Dogs <input type="checkbox"/>	Creditors <input type="checkbox"/>	Debtors <input type="checkbox"/>	Planning <input type="checkbox"/>	Building <input type="checkbox"/>	Health <input type="checkbox"/>
Electoral <input type="checkbox"/>	Other <input type="checkbox"/>	Please List: ⇨				

Details of Property/s Owned:

House No.	Lot No.	Street & Suburb

Name Details:

Previous Surname	Previous Given Names

New Surname	New Given Names

Residential Address:

	Postcode
Postal Address (if different from above):	
	Postcode
Phone No(s):	
Email address:	

Signature: _____ Date: ___/___/___

Office Use Only

Assessment Number/s	Owner Code/s	Other Reference

Updated by: _____ Date: _____