

Change of Address Form

PRIVACY NOTICE: SOUTH BURNETT REGIONAL COUNCIL IS COLLECTING YOUR PERSONAL INFORMATION FOR THE PURPOSE OF PROCESSING THIS FORM. COUNCIL WILL RETAIN THESE DETAILS FOR THE PURPOSE OF CONTACTING YOU WITH REGARDS TO ANY COUNCIL RELATED MATTERS. YOUR PERSONAL DETAILS ARE HANDLED IN ACCORDANCE WITH THE INFORMATION PRIVACY ACT 2009 AND WILL BE USED FOR THE PURPOSES OF RESPONDING TO YOU AND WILL NOT BE DISCLOSED TO ANY OTHER PERSON OR AGENCY EXTERNAL TO COUNCIL WITHOUT YOUR CONSENT, UNLESS REQUIRED OR AUTHORISED BY LAW.

Section 1 – Contact Details –

Unless otherwise stated, this change of address will apply to every owner listed on the rate notice/s

Surname:			Given Names:		
Company/Trustee Name:					
Telephone and	Home:		Work:		Mobile:
Other contacts:	Facsimile:		Email:		

Section 2 – Address Details

New Postal Address					
New Residential Address <i>*if different from postal address</i>					
Previous Postal Address					

Section 3 – Council Correspondence

Please complete the following to indicate which Council departments this address change applies to:

Rates: *Yes <input type="checkbox"/> No <input type="checkbox"/> <i>*If yes, please list details of each property affected by this change</i>	Property Lot/Plan & Address Details:		Assessment No:	Property ID:	
Dog Registration:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Building/Planning:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Creditors/Debtors:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Licences:	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Applicants Signature

Signed:.....	Date:
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