

## Change of Postal Address Form

	Valuation Number:
Full Name of Property Owners:	
Situation address:	
New postal address:	
Town/city:	Post code:
Phone:	Business:
Mobile number:	
Date Effective From:	
,	
√ I'd like to receive f	future rates notices via email
Email Address:	atare rates notices via cinan
This postal address request is for:  ✓	
RATES	Property ID:
DOGS	Owner No:
WATER BILL	A/C No:
DEBTORS	Debtor No:
OTHER	Please Specify:
Signed:	Date:
FOR OFFICE USE ONLY	
Date Received:	Ву:
Updated:	
Rates Dogs Water Bill Debtors Other (Rates dept) CT	

Te Awamutu – 101 Bank Street Ph: (07) 872 0030 Fax: (07 872 0033 Cambridge – 23 Wilson Street Ph: (07) 823 3800 Fax: (07) 823 3820