Change of Details Form



FRM Change of Details Form REV0

Current Details: please complete one selection each				
Full Name (person 1):				
Phone Number: H:	M:			W:
Email Address:			·	
Full Name (person 2):				
Phone Number: H:	M:			W:
Email Address:				
Old Address				
Residential Address (include postcode):		Postal Address (include postcode):		
New Address: Please write 'as above' if all of the details are the same				
Please tick Owner		Occupier		
Residential Address (include postcode):		Postal Address (include postcode):		
Receiving Shire of Irwin Correspondence				
I would like to receive my Rates Notice(s) via	•	mail \square	Mail \square	
I would like to receive my Debtors(s) Invoice via		Eı	mail \square	Mail \square
Change of Name: Please provide documentary evidence of name change				
Old Name:		New Name:		
Reference Details: Please provide reference numbers where possible in each area below				
Property Assessment(s) see rates:				
Debtor/Creditor Accts - acct number(s) see invoice:				
Dog registration no(s)/name(s):				
Cat registration(s)/name(s):				
Please indicate if a replacement registration tag is required: Animal Name:				
I/We give permission for the Shire of Irwin to use this information to change the address/name details on all Shire managed systems. This form must be signed by the property owner, animal owner, creditor, debtor or applicant. If the property is owned jointly, all property owners must sign. If signed by a power of attorney, a copy of the power of attorney must be provided. If executed by a company, the form must be executed in accordance with the Company's constitution and the Corporations Act 2001 (C'wealth)				
Signature (Person 1):		Date:		
Signature (Person 2):		Date:		