

Change of address notification

Title Given Name/s

Surname Date of Birth / /

Your previous residential address

Suburb State Postcode

Please print your **NEW** contact details (for future correspondence)

Your current residential address

Unit/Street No Street

Suburb State Postcode

Postal Address (if different from street address)

Suburb State Postcode

Phone H B M

Email

Please update my contact details for [please tick (✓) below]

Rates Notices	<input type="checkbox"/>	Food or Health Licence	<input type="checkbox"/>
Debtors Invoices	<input type="checkbox"/>	Current Building Application	<input type="checkbox"/>
Creditor Details	<input type="checkbox"/>	Current Planning Application	<input type="checkbox"/>
Dog Notices	<input type="checkbox"/>	General Manager's Roll	<input type="checkbox"/>
Dog Location	<input type="checkbox"/>	Other, please specify:	<input type="text"/>

If you need to change your postal address for Rates Notices, please enter details of the property or properties that you own: **(if the properties are owned jointly please ensure both names are detailed above and the form is jointly signed)**

Unit/Street No.	<input type="text"/>	Street	<input type="text"/>
Unit/Street No.	<input type="text"/>	Street	<input type="text"/>
Unit/Street No.	<input type="text"/>	Street	<input type="text"/>

Please send me a copy of the latest unpaid Rates Notice to the new postal address

Please email Rates Notices to the email address provided

Your Signature _____ Date / /

Print Name: _____

Please go to page 2

You can nominate a different mailing address from your own, for your Rates Notices.

Please note that as the property owner/s you will be liable for all unpaid rates charges, even when mailed to a nominated alternate address.

Please complete this section if you would like to nominate an alternate mailing address:

I authorise Council to send my Rates Notices:

To my: Tenant Property Manager Authorised Representative

Title Given Name/s

Surname/Company

Postal Address

Suburb State Postcode

Phone H B M

Owner Signature _____ Date / /

Owner Signature _____ Date / /

Personal Information Protection Statement

As required under the *Personal Information Protection Act 2004*

1.	Personal information is managed in accordance with the <i>Personal Information Protection Act 2004</i> and may be accessed by the individual to whom it relates, on request to Launceston City Council.
2.	Information can be used for other purposes permitted by the Local Government Act 1993 and regulations made by or under that Act, and, if necessary, may be disclosed to other public sector bodies, agents or contractors of Launceston City Council, in accordance with Council's Personal Information Protection Policy (17-Plx-005).
3.	Failure to provide this information may result in your application not being able to be accepted or processed.

File No. SF7621					
EO		OD		Box	
Doc. No.					
Action Officer			Date Received		
Rates					

PURPOSE:

To facilitate the collection and change of names and address data.

SCOPE:

Applies to the change of addresses for all applications.

RELATED POLICIES & PROCEDURES: N/A