

CHANGE OF ADDRESS FORM

(Under freedom of Information Act 1992, S.45)

Chief Executive Officer City of Greater Geraldton PO Box 101 GERALDTON WA 6531

I wish to noti	fy you of m	change of address for the following p	roperty:
Lot No:			
Street No:			
Street Name:			
Suburb:	urb: Postcode:		
Please now	amend you	records to show that my correct resid e	ential address is now:
Please now	amend you	records to show that my correct posta	Il address is now:
Suburb:			Postcode:
Telephone:	()_	(during office	e hours)
Mobile:	()_	Facsimile:	()
Email:		Date of Birtl	h:
		anged for all parties on the title?	
Yours faithfu	lly		
SIGN	IATURE	NAME IN FULL	DATE
WADD:		OFFICE USE ONLY	
WARD: OWNERS C	ODE:	ASS:	
FORM RECEIVED BY: DATE: / /			
FORM PROCESSED BY: DATE: / /			
PREVIOUS A			