

Change of Customer Name/Address



Applicant's Details

Your previous full name (your name as currently entered in our system):

Your new full name Include Middle Name(s): _____

Physical address: _____

_____ Postcode: _____

Postal address: _____

_____ Postcode: _____

Home phone : _____ Mobile: _____

Bus phone: _____ Email: _____

Reason for Name Change – Please tick one box only:

- Marriage (please attach a copy of your Marriage or Civil Union Certificate)
- Deed Poll (please attach a copy of your certificate)
- Name correction – my name is incorrectly entered into Council's system, please update it.
- Name Removal (please attach a certificate of title)

This change will also effect my

- Rates
- Dog Registration
- Debtors
- Other (please specify): _____
- Licensing
- Water Billing
- Building

Declaration

I declare that the details I have provided here are true and correct. I have attached relevant evidence the name change I have requested.

Signed: _____ Date: _____

Office Use Only	
Assessment No: _____	Date Received
Document No: _____	
Customer ID: _____	
Corporate Vision Updated: Yes / No	
<input type="checkbox"/> RT <input type="checkbox"/> DG <input type="checkbox"/> WB <input type="checkbox"/> LI <input type="checkbox"/> AR <input type="checkbox"/> AN <input type="checkbox"/> Other	
Signed by CSO : _____	

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