

# Change of Mailing Address Request Form



**Property Owner Name(s):**

\_\_\_\_\_  
\_\_\_\_\_

**New Mailing Address:**

Street: \_\_\_\_\_

Town/city: \_\_\_\_\_ Postal code: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email: \_\_\_\_\_

***Would you like your bills emailed?***

Is the new address to be used for water bills as well? \_\_\_\_\_

Tax bills: YES or NO

Water bills: YES or NO

**Properties:**

**Property 1:**

Roll number: \_\_\_\_\_

Property address: \_\_\_\_\_

**Property 2:**

Roll number: \_\_\_\_\_

Property address: \_\_\_\_\_

**Property 3:**

Roll number: \_\_\_\_\_

Property address: \_\_\_\_\_

**Property Owner Authorization:**

Signature: \_\_\_\_\_ Date (mm/dd/yy): \_\_\_\_\_

Signature: \_\_\_\_\_ Date (mm/dd/yy): \_\_\_\_\_

Information provided on this form and any applicable attachments, is collected under the authority of the Municipal Act, 2001, Section 340, and will be used by the Town of New Tecumseth, Finance Department to process your request. If you have questions about this collection, please contact a member of the Tax Division, 10 Wellington Street E. Alliston, Ontario L9R 1A1