

## **Change of Address Form**

All change of address requests must be completed in writing and signed. Please return your completed form to info@whitsundayrc.gld.gov.au or PO Box 104, Proserpine QLD 4800 or nearest customer service centre. Individual/s □ Business / Organisation Section 1 - Individual/s Individual 1 Individual 2 Surname Surname Given Name/s Given Name/s Date of Birth Date of Birth **Phone Number** Phone Number **Email Address Email Address New Postal** Address Section 2 - Company / Organisation **Business Name Trading Name ABN Email Address Phone Number** Mobile Number **New Postal** Address Section 3 - Individual accounts to be updated (if left blank all account correspondence will be updated) Rates & Water Local Law / Health Licensing **Animal Registration** Animal kept at: Email (Remittances) **Email (Purchase Orders)** Creditor / Debtor Section 4 - Declaration I/We, the applicant, declare that the above information is correct in all respects, at the time of lodgement of this application with the Whitsunday Regional Council. Should any of the details given in relation to this application be changed in the future, the applicant shall advise the Whitsunday Regional Council in writing prior to any such change being implemented. Signature 1 Date Signature 2 Date

PRIVACY DISCLAIMER Whitsunday Regional Council will only use personal information provided, to remain in contact with you regarding relevant council business. This information will only be disclosed to other third parties with your written authorisation or as we are required to by law.

Name/s and Position of Authorised Signatory

for Company / Organisation