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CHANGE OF ADDRESS NOTIFICATION RATES

INDIVIDUAL DETAILS	
Surname:	First Name(s):
Property Address:	
Town:	Postcode:
Old Residential Address:	
Old Postal Address:	
New Residential Address:	
New Postal Address (if different to above):	
Town:	Postcode:
Phone:	Mobile:
Email:	
I request Council to email my rates notice (Tick Box)	
(I understand paper notices will stop unless this arrangement is cancelled)	
DECLARATION	
Signature:	Signature:
Name:	Name:
Date:	Date:
Date.	Date.
Privacy Statement The personal information on this form is required by Council for administrative purposes. We will only use your personal information for this and related purposes. If this information is not provided, we may not be able to deal with this matter. You may access and/or amend or personal information at any time. How we use this information is explained in our Privacy Policy, which is available at www.circularhead.tas.gov.au or at the Council office.	
OFFICE USE ONLY	
Received:	Date:
PID:	
Tasked In ECM	
Entered in Property records	