Request to Change Postal Address



PID:	
O#:	
Office use	

et No.		Street		
1				
ious Postal ress				
Postal ress				
il Rates Notices	(Please Circle)	Yes	No	
Reminders – Rat	tes/Dogs	Yes	No	
Please indicate	if you have any c	of the following th	at also require a change of postal address	:
Dog regi:	stration Email	Yes	Development Application	
Caravan	Licence		Other (please specify):	
Food licer	nce			
*All property	owners must print	their name in ful	and sign below.	
Full Name:			Signature:	
Daytime Phon	e Number:		Email:	
Full Name:			Signature:	
Daytime Phon	e Number:		Email:	
Full Name:			Signature:	
Daytime Phon	e Number:		Email:	
Post to: Email to:	completed form t Break O'Day C admin@bodc.t ice at the above c	Council, 32-34 G as.gov.au,	eorges Bay Esplanade, St Helens TAS 7216	, or;

Privacy Statement: The personal information requested on this form is being collected by Council for rating purposes. The personal information will be used solely by Council for that primary purpose or directly related purpose. Council may disclose the information to other regulatory organisations where required to by law; officers of Break O'Day Council; data service providers engaged by Council from time to time; and any other agent of Council. If you cannot provide or do not wish to provide the information sought, Break O'Day Council will be unable to process your application. You may make application for access or amendment to information held by Council. Enquiries concerning the matter can be addressed to the Information Officer, Break O'Day Council, 32-34 Georges Bay Esplanade, St Helens TAS 7216, or email admin@bodc.tas.gov.au.