## **GLEN INNES SEVERN COUNCIL**

PO Box 61 Glen Innes NSW 2370

## CHANGE OF POSTAL ADDRESS/ CONTACT DETAILS FORM



## Instructions for completing form:

- Complete ALL information in REQUIRED INFORMATION
- Please provide complete Street / Rural Address Property Name alone is not acceptable
- ALL owners are required to sign this document

REQUIRED INFORMATION					
Rates/Water					
Assessment No/s:					
AND/OR					
Debtor Code/s:					
<b>OLD</b> Postal Address:					
Suburb / Locality:		Postcode:			
<b>NEW</b> Postal Address:	Street No:				
Suburb / Locality:		Postcode:			
Email:		Phone (H):			
Phone (W):		Phone (M):			
Owner Name:		Date:			
Owner Signature:		Date:			
Owner Name:		Date:			
Owner Signature:		Date:			
OFFICE USE ONLY					
Customer Service Officer:		Date:			
Update Practical I	Plus:	Date:			
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Version Number: 7.0	Review Date:	Responsible Officer:
Date of Effect: July 2023	Jun 2025	RO