

GLEN INNES SEVERN COUNCIL

PO Box 61 Glen Innes NSW 2370

CHANGE OF POSTAL ADDRESS FORM



Instructions for completing form:

- Complete ALL information in **REQUIRED INFORMATION**
- Please provide complete Street / Rural Address – Property Name alone is not acceptable

REQUIRED INFORMATION			
Rates/Water Assessment No/s:			
AND/OR Debtor Code/s:			
OLD Postal Address:			
Suburb / Locality:		Postcode:	
NEW 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 Plus:		Date:	

Version Number: 6.0
Date of Effect : July 2021

Review Date:
Jun 2022

Responsible Officer:
RO