

CHANGE OF ADDRESS FORM

Property Address: _____

Owner/s Name/s in full: _____

Previous Postal Address: _____

_____ Postcode: _____

New Postal Address: _____

_____ Postcode: _____

New Residential Address:
(if different to postal) _____

_____ Postcode: _____

Emergency Contact Number _____

Email address _____

Signed: _____ Date _____

Signed: _____ Date _____

Signed: _____ Date _____

By submitting this form, you acknowledge that the Shire of Nannup collects and uses personal information for the purpose of administering its services and functions such as maintaining accurate records, meeting legal reporting and governance obligations. For more information about how we collect, use and store personal information refer to our Privacy Policy on www.nannup.wa.gov.au

Please return completed forms to:

Chief Executive Officer, Shire of Nannup, PO Box 11, Nannup WA 6275