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## CHANGE OF ADDRESS NOTIFICATION

Full Name		D.O.B
Full Name		D.O.B
Full Name		D.O.B
Full Name		D.O.B
<b>New Postal Address</b> _____ _____		
Residential Address _____ _____		
<i>Previous Address</i> _____ _____		
Telephone	Mobile	
Email		
Please Change My Postal Address For <i>(Please tick)</i> <input type="checkbox"/> Rates <input type="checkbox"/> Dog Registration <input type="checkbox"/> Applications - building/planning/plumbing <input type="checkbox"/> Other Licences		
Please list all properties owned in the <b>SORELL MUNICIPALITY</b>		OFFICE USE (PID No#)
_____		_____
_____		_____
_____		_____
_____		_____
Signature		Date
<b>OFFICE USE ONLY</b>		
NAR Checked for duplicates <input type="checkbox"/>		Date Address Updated
Address changed by		