

# Notice of Change of Name Details



## CHANGE OF NAME

*Have you changed your name?*

Reason for Change:  Change of Ratepayer  Marriage Status  Estate  
 Company/Business  Other: \_\_\_\_\_

Change of Name: *Full Name – First Middle & Surname*

Previous Name: \_\_\_\_\_

New Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**\*Please attach any evidence for legal name changes**

## CHANGE OF BUSINESS

*Have you changed your Business Details?*

Reason for Change:  Change of Ownership  Change of Business Name  
 Change of Contact Person  Other: \_\_\_\_\_

Date of Change: \_\_\_\_\_

Business Name:

Previous Name: \_\_\_\_\_

New Name: \_\_\_\_\_

Change of  Ownership or  Contact Person: *(tick applicable)*

Previous Name: \_\_\_\_\_

New Name: \_\_\_\_\_

## REMOVAL OF NAME

*Have you changed your name?*

Name of Person:

*Full Name – First Middle & Surname*

Name: \_\_\_\_\_

Reason for Removal: \_\_\_\_\_

Remove From:  Rates  Health  Animals  
*(See rear for details)*  Finance  Home Care  Local Laws  
 ALL  Bluewater Fitness  Family Day Care  Planning Application  
SERVICES  Events  Maternal Health Care  Building Application

## AFFECTED PROPERTIES

*List properties affected by these changes*

I am:  the sole owner  a joint owner  a company representative of the properties.

Property Address	Assessment No

## CONTACT DETAILS

*Must be Completed*

Postal Address: \_\_\_\_\_

Residential Address: \_\_\_\_\_

*\*Please note residential address is mandatory for the serving of notices*

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

**Please provide Proof of Identification – Turn Over Page**

# Notice of Change of Address Details



## APPLICANT DETAILS

Please note Change of Name is on front of form

### Applicant Details:

Must be Completed

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

## NEW ADDRESS

Have you changed your address?

Previous Address: \_\_\_\_\_

New Address: \_\_\_\_\_

Residential Address: \_\_\_\_\_

\*Please note residential address is mandatory for the serving of notices

### Other Affected Person/s

Does the change of address apply to anyone else?

Given Name: \_\_\_\_\_ Surname: \_\_\_\_\_ DOB: \_\_\_\_\_

Given Name: \_\_\_\_\_ Surname: \_\_\_\_\_ DOB: \_\_\_\_\_

## AFFECTED PROPERTIES

List properties affected by these changes

I am:  the sole owner  a joint owner  a company representative of the properties.

Property Address	Assessment No

Please notify the following departments of the above changes:  **ALL SERVICES**

- Rates** – Service of Rates Notices
- Finance** – Accounts Receivable & Payable
- Home Care** – Home Care, Meals on Wheels
- Family Day Care** – Family Details
- Maternal Child Health** – Family Details
- Local Laws** – Disabled Parking Permits, A-Frame Permits, Street Furniture Permits
- Animals** – Registration of Animals (Please advise if animals are located at a difference address)
- Bluewater Fitness** – Gym Membership
- Events** – Event Organisers, Stall Holders
- Health** – Septic Permits, Food Registration
- Building** – Building Applications or Permits
- Planning** – Planning Applications or Permits

Address: \_\_\_\_\_

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

## OFFICE USE ONLY – Name & Address Changes

- Proof of Identity: (Tick an option)
- Show Photo ID to reception staff
  - Attach a photocopy of Photo ID
  - Attach a scanned image of Photo ID

Office use only:  
Sighted by :  
Date :

**DECLARATION:** The Colac Otway Shire Council collects personal information to provide a variety of community services. The information collected in this form is used only for the purposes contemplated by the form (primary purpose) and is not passed onto third parties. In some instances however, disclosure is required by law or is necessary for the protection of persons or property. Where this occurs, Council will take every reasonable step to ensure your privacy is protected in accordance with the Information Privacy Act 2000 (Vic). Should you need to change or access your personal details or require further information about Council's Privacy Policy contact our Privacy Officer on 5232 9400.

Office use only: Trim reference: F13/5666  
Row Reference:

