

Change of Address Notification / Property Identification

Note: Personal information is collected by the Municipality of North Cowichan under the authority of section 26(c) of the Freedom of Information and Protection of Privacy Act for the purpose of processing and administering for the following described accounts. Should you have any questions about the collection of this personal information, please contact the Deputy Director of Corporate Services, (250) 746-3100; 7030 Trans-Canada Highway, Duncan, BC V9L 6A1.

| |
|------------------|
| Folio No. |
|------------------|

Do you own more than one property in North Cowichan? YES NO

If YES, list the FOLIO(s) or BC Assessment Roll Number(s) of other properties to which this change applies:

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| |
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| |
|-----------------------------------|
| Civic Address of Property: |
|-----------------------------------|

| | |
|------------------|--------------------------------|
| Last Name | First & Middle Name |
|------------------|--------------------------------|

New Mailing Address

| |
|----------------------|
| Street/PO Box |
|----------------------|

| |
|---------------|
| Street |
|---------------|

| | | |
|-------------|-----------------------|------------------------|
| City | Province/State | Postal/Zip Code |
|-------------|-----------------------|------------------------|

| | | |
|----------------|------------------|--------------|
| Country | Phone No. | Email |
|----------------|------------------|--------------|

MULTIPLE OWNERS – Same address as above? YES NO

(If different than above, and different than on file, please complete a second address change form.)

Other Accounts

| | |
|-------------------|-----------------------------------------------------|
| Utilities: | Business Licence (Additional Form Required): |
|-------------------|-----------------------------------------------------|

| | |
|---------------------|------------------------------------|
| Dog Licence: | Pre-Authorized Withdrawals: |
|---------------------|------------------------------------|

| | | |
|-------------------|------------------|-------------|
| Print Name | Signature | Date |
|-------------------|------------------|-------------|

Save and Email form to: finance@northcowichan.ca

I certify that the information provided in this change of address notification is true, accurate, and complete.