

Change of Name / Address

Notification of New Contact Details (Freedom of Information Act 1992, s.12)

PROPERTY DETAILS*

Assessment No	Property Address			
OWNEDO DETAILO:				
OWNERS DETAILS* Family Name/s Given Name/s Date of E				
Family Name/s Given N		ame/s		Date of Birth
Previous Address				
Residential Address				
Postal Address (if different)				
Contact Telephone I	No. Email A	ddress		
*if more space is required for additional properties/owners/contact details, please attach multiple sheets.				
	as been a change of owne			
change of name due to	marriage or other reason	s, or an		
	will be necessary for ac pplied to council for record			
	title, copy of marriage ce			
etc.				
This form is NOT to be u	used as notification of cha	ange of		
ownership, and will not b	be accepted by the City of			
Karratha for this purpose	e.			
Which departments do you want your details updated?				
Building Debtors		\vdash	Planning Health	
Cat/Dog Registration		\vdash	Rates	
	o Number		Naics	
Name of person completing this form:				
Signature (required):				
Date:				

Upon completion of this form, please submit by email to enquiries@karratha.wa.gov.au or regular mail to: City of Karratha, PO Box 219, Karratha WA 6714