

Change Of Address/Name

Date: _____

Valuation Number: 0728 _____ \ _____ . _____

Owner: _____

Property Address: _____

Address Change

From: _____

To: _____

Telephone Number: _____ Email: _____

Rates instalments to be emailed each quarter:

Type of ID Sighted: _____ Personally known to Staff:

Name Change

(Verification attached)

From: _____ To: _____

Privacy Statement

The information provided on this form will be used to ensure that rates notices are sent to the correct address and may be used as an address for contact for any unpaid rates. Staff having direct access to this information include: Customer Services, Accounting and Rates staff. This information may also be passed on to a third party to pursue the collection of unpaid rates.

Under the Privacy Act 2020, you have a right of access to your personal information held by the Kawerau District Council and you are entitled to request that your personal information be correct.

Signature: _____ Date: _____

Customer Services Officer: _____ Date: _____

Office Use Only

Customer Services Officer: _____

Actioned by: _____ Date: _____