



CHANGE OF NAME - RATES

(PROOF REQUIRED IE: BIRTH CERTIFICATE/MARRIAGE CERTIFICATE ETC)

NOTE: Any personal information submitted to the City of Holdfast Bay will be dealt with according to the Privacy and Personal Information Protection Act (1998), the Freedom of Information Act (1991), and the Local Government Act (1999).

1. CURRENT NAME/S

SURNAME:	
FIRST NAME:	
SURNAME:	
FIRST NAME:	

2. PROPERTY

3. NEW NAME/S

SURNAME:	
FIRST NAME:	
SURNAME:	
FIRST NAME:	

4. NEW MAILING ADDRESS (IF APPLICABLE)

5. ADVISED BY

NAME:	PHONE:
SIGNATURE	Date: / /

6. PLEASE RETURN FORM:

In Person: City of Holdfast Bay, 24 Jetty Road, Brighton; **By Mail:** City of Holdfast Bay, PO Box 19, Brighton SA 5048;
By Fax: 08 8298 4561; **By Email:** rates@holdfast.sa.gov.au

OFFICE USE ONLY

Billing No/Prop No:
Address: