

CHANGE OF ADDRESS / OWNER DETAILS

PROPERTY DETAILS

Property No	
Property Address	
Suburb	Post code:

Owner 1:

Please tick: Owner / Occupier?

 \Box YES \Box NO

NEW DETAILS (certified documentary evidence supporting name/title change must be provided)

Surname / Company Name	
Other names in full	
Residential address*	
Suburb / Town	. Post code:
Email address	Contact number
Postal address (if same as above leave blank)	
Suburb / Town	. Post code:

PREVIOUS DETAILS

Surname / Company Name	
Other names in full	
Residential address*	
Suburb / Town	Post code:
Postal address (if same as above leave blank)	
Suburb / Town	Post code:

Owner 2: (If applicable)

Please tick: Owner / Occupier?

NEW DETAILS (certified documentary evidence supporting name/title change must be provided)

Surname / Company Name	
Other names in full	
Residential address*	
Suburb / Town	Post code:
Email address	Contact number
Postal address (if same as above leave bl	ank)
Suburb / Town	Post code:
PREVIOUS DETAILS	
Surname / Company Name	
Other names in full	
Residential address*	
Suburb / Town	Post code:

Postal address (if same as above leave blank)	
Suburb / Town Post	code:

Owner 3:

Please tick: Owner / Occupier?

NEW DETAILS (certified documentary evidence supporting name/title change must be provided)

Surname / Company Name	
Other names in full	
Residential address*	
Suburb / Town	Post code:
Email address	Contact number
Postal address (if same as above leave blank)	
Suburb / Town	Post code:

PREVIOUS DETAILS

Surname / Company	y Name				•••••
Other names in full					•••••
Residential address*.					
Suburb / Town		Post	code:		•••••
Postal address (if sar	ne as above leave blo	ank)			
Suburb / Town		Post	code:		•••••
TRANSFER OF DOG / Do you have a dog Morawa?	CAT REGISTRATION or cat registered with	the Shire of	□ YES	□ NO	
If YES, will the dog / a	cat live at this address	ŝŚ	□ YES		
Plaga provida ragis	tration numbers and n	amos of all anin	ade		
If you answered NO	to be above, please p	orovide details c	of where the	e dog / cat will live:	
				_	
Please indicate if a r	eplacement tag is rec	quired 🗆 A	nimal Name	9:	
SIGNATURE OF OWNI	ERS:				
		-			
		-			
Return by email to:	<u>rates@morawa.wc</u>	a.gov.au			
PC	ire of Morawa 9 Box 14 prawa WA 6623	In Person:	26 Winfiel	lorawa Office d Street WA 6623	
	ONLY				