

REQUEST FOR CHANGE OF MAILING ADDRESS

UTILITY ACC #: _____ TAX ACC #: _____

MUNICIPAL (STREET) ADDRESS: _____

NAME: _____

NEW MAILING ADDRESS: _____

EMAIL: _____

PHONE NUMBER: _____

PRINT NAME

SIGNATURE

Tax department E-Mail: propertytax@whitecourt.ca

Utility department E-Mail maureenhumby@whitecourt.ca

