## Change of mailing address advice



Customer Refe	erence Numbe	er (found on t	the top right-	hand corner	of your Ra	tes Notice)
our connection	on to the Prop	erty				
Owner						
Managing ag	gent					
roperty Detai	ils					
Unit No. Street No.			Street			
Suburb			I			Postcode
Owner/s Name	/s					
our Details (	Only the owne	r or their m	nanaging ag	ent can cha	ange the n	nailing address)
Ms/Mr/Mrs/Other (please state) Family Name						Given Name
Unit No.	Street No.	Street				
Suburb						Postcode
Tel (Home/Work/Mobile)				Email		
Please change	my mailing ad	ldress to				
C/- (Company i	name if applicabl	e)				
Unit No.	Street No.					
Suburb						Postcode
Suburb						rostcode
					I	•
Signature						, ,
1					Date	e//

The personal information provided on this form (including your name and other details) will be handled in accordance with the Privacy and Personal Information Protection Act 1998 and may be available to the public under various legislation. Refer also to the Privacy Statement on Council's website

## **Postal address**

PO Box 21, Rockdale NSW 2216 ABN 80 690 785 443

## **Bayside Customer Service Centres**

Rockdale Library, 444-446 Princes Highway, Rockdale Westfield Eastgardens, 152 Bunnerong Road, Eastgardens E council@bayside.nsw.gov.au W www.bayside.nsw.gov.au T 1300 581 299 | 02 9562 1666