



# CHANGE OF OWNERSHIP / ADDRESS

ACACC03-TMP-007 Date Approved: 03 July 2017

DATE:	ASSESS NO:
PROPERTY ADDRESS:	

NAR NUMBER:	PREVIOUS OWNER
1.	
2.	
3.	

NAR NUMBER:	NEW OWNER
1.	
2.	
3.	

POSTAL ADDRESS	RESIDENTIAL ADDRESS

NOMINATED CONTACT:	
TELEPHONE: <i>(A Contact Number is mandatory)</i>	Mobile: _____ Home: _____
E-MAIL ADDRESS:	
EFFECTIVE DATE	

NOTES:	
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\_\_\_\_\_  
SIGNATURE\_\_\_\_\_  
FULL NAME (Print)\_\_\_\_\_  
DATE

