



Telephone:
Facsimile:

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07 4671 7433

Postal:
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Web:

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Change of Address Notification

Please list all names of owners affected by this address change

Surname	Given Name(s):	
Company Name	ABN:	
Company Contact Name & Position Held		
Telephone & Other Contacts	Home:	Fax:
	Mobile:	
	Email:	

Address Details

Previous Postal/Email Address	Street/ PO Box:	
	Suburb/Town:	Postcode:
	Email:	
New Postal/Email Address	Street/ PO Box:	
	Suburb/Town:	Postcode:
	Email:	

Council Correspondence: Complete the following - Which department does this address change apply to:

Rates	Property Address or Lot and Plan		Assessment No.
Dog Registration	Current Dog Tag Number/s:		
Licences	<input type="checkbox"/> Food Premises	<input type="checkbox"/> Roadside Stalls	
	<input type="checkbox"/> Caravan Parks	<input type="checkbox"/> Other _____	
	<input type="checkbox"/> Goods on Footpath		
Debtor / Creditor Name			
Library	Membership Number:		

Name: _____ Signature: _____ Date: _____