



COUNTY OF Northern Lights

#600, 7th Ave NW, PO Box 10, Manning AB T0H 2M0
Phone 780-836-3348 Fax 780-836-3663
Toll Free 1-888-525-3481

CHANGE OF ADDRESS FORM

Name: (First, Middle, Last) _____

Old Address: _____

New Address: _____

Town: _____

Town: _____

Prov. _____ Postal Code: _____

Prov. _____ Postal Code: _____

Phone: _____

Cell#: _____

Email: _____

Name Address Identification Number: _____

This personal information is being collected in accordance with Section 32 © of the Freedom of Information and Protection of Privacy Act and is being collected for the purpose of ensuring appropriate addresses of ratepayers on file are current and accurate.

TAXATION SYSTEM INFORMATION

Legal Land Description: _____

Affected Tax Roll Numbers:

Reason for Change:

- Title Transfer, Agreement of Sale, Newsletter, Additional Title Holder, Other, Move-Up Magazine, Moved, Newspaper

Other Action Required: _____

Received By: _____ Date: _____

Processed By: _____ Date: _____

Confirmation of Change Received By:

- Yes No Newsletter Yes No Move-Up Magazine Yes No Newspaper