## **CHANGE OF MAILING ADDRESS**



Return completed "Change of Mailing Address" form by mail or email to serviceking@king.ca

| King Township<br>2585 King Road<br>King City, Ontario<br>Canada, ON L7B<br>Website: www.k | Ph<br>Fa:            | Phone: 905.833.5321<br>Fax: 905.833.2300<br>Email: serviceking@king.ca |                  |                    |        |         |        |        |                     |                  |         |                |               |        |         |        |        |           |  |  |
|---|----------------------|--|------------------|--------------------|--------|---------|--------|--------|---------------------|------------------|---------|----------------|---------------|--------|---------|--------|--------|-----------|--|--|
| Form must be sign   | ed by                | <u>ALL</u> o   | wners            | s on tit           | le as  | chang   | e of r | nailiı | ng ada              | lress a          | pplie   | s to <u>Al</u> | L <u>L</u> ow | ners   | unless  | other  | wise s | pecified. |  |  |
| Tax Roll No   | 0                    | 0  | 0                | -                  |        |         |        | -      |                     |                  |         |                |               | -      | 0       | 0      | 0      | 0         |  |  |
| Water Account   | No                   |  |                  |                    |        |         |        |        |                     | •                |         |                |               |        |         |        |        |           |  |  |
| Customer Inform   | nation               | (All   | fields           | are n              | nand   | atory   | ):     |        |                     |                  |         |                |               |        |         |        |        |           |  |  |
| Municipal Address   | :                    |  |                  |                    |        |         |        |        |                     |                  |         |                |               |        |         |        |        |           |  |  |
| Street:   | reet: Town:          |  |                  |                    |        |         |        |        |                     |                  |         |                |               |        |         |        |        |           |  |  |
| Postal Code:  |                      |  |                  |                    |        |         |        |        | <mark>Ema</mark>    | <mark>il:</mark> |         |                |               |        |         |        |        |           |  |  |
| Telephone:  |                      |  |                  |                    |        |         |        |        |                     |                  |         |                |               |        |         |        |        |           |  |  |
| Owner's Name(s)*  | :                    |  |                  |                    |        |         |        |        |                     |                  |         |                |               |        |         |        |        |           |  |  |
| I/we,<br>advise the Townsh<br>the following. I un<br>Mailing Address:                     | ip of K              | ing th   | nat the          | e mailii           | ng ad  | dress i | n con  | nect   | ion wi <sup>.</sup> | th the           | above   | e mun          | icipa         | l prop | perty h | as bee | n cha  | nged to   |  |  |
| -   |                      |  |                  |                    |        |         |        | Т      | own:                |                  |         |                |               |        |         |        |        |           |  |  |
|   | Street: Postal Code: |  |                  |                    |        |         |        |        |                     |                  | Email:  |                |               |        |         |        |        |           |  |  |
| Telephone:  |                      |  |                  |                    |        |         |        |        |                     |                  |         |                |               |        |         |        |        |           |  |  |
| Effective date of n   | nailing              | addr   | ess ch           | ange:              |        | Y       | Y Y    | ( )    | -                   | M                | M       | -              | D             | D      | ]       |        |        |           |  |  |
| Owner's Name:   | s Sig                | ignature:  |                  |                    |        |         |        |        |                     | :                |         |                |               |        |         |        |        |           |  |  |
| Owner's Name:_  | s Sig                | gnature:   |                  |                    |        |         |        |        |                     | Date:            |         |                |               |        |         |        |        |           |  |  |
| Owner's Name:   | s Sig                | Signature:   |                  |                    |        |         |        |        |                     | Date:            |         |                |               |        |         |        |        |           |  |  |
| Owner's Name:   | wner'                | 's Signature:  |                  |                    |        |         |        |        |                     | Date:            |         |                |               |        |         |        |        |           |  |  |
| Internal use only - Dia   | imond c              | <u>hecks a</u><br>Form s   | ind upd<br>igned | <u>ate:</u><br>□Cι | ustome | er IDs  | □Fo    | rm att | ached               | ים               | Notes u | pdated         |               | Імра   | C summ  | •      |        |           |  |  |