## REQUEST TO CHANGE MAILING ADDRESS PROPERTY TAX



ACCOUNT DETAI	LS:			
Name				
Roll Number				
NEW ADDRESS:				
Mailing Address				
City/Town		F	Province	
Postal Code				
OLD ADDRESS:				
Mailing Address				
City/Town		F	Province	
Postal Code				
CONTACT INFOR				
Phone Number:				
AUTHORIZATION:				
I understand that this form ONLY changes my address with County of Vermilion records, and it is my responsibility to contact the Land Titles office to fully complete the address change.				
Name (Please Prin	t) Signatu	Jre		Date
Please return this completed form to the County of Vermilion River by:				
Email: taxes@county24.com				

OR

Mail: Box 69, Kitscoty, AB TOB 2P0

Your information is being collected under Section 33C of the Freedom of Information and Protection of Privacy Act and we will be protected under the provisions of the Act. For more information please contact the FOIP Coordinator at 780-846-2244.