



Centre Wellington

CHANGE OF MAILING ADDRESS FOR TAXATION REQUEST FORM

OWNERS NAME: _____

PROPERTY ADDRESS: _____

ROLL #: _____

NEW MAILING ADDRESS: _____

EFFECTIVE DATE OF MAILING ADDRESS CHANGE: _____

SIGNATURE: _____

Collection Use and Disclosure Statement for Mailing Address Change Form

Personal Information of this form is collected under the authority of the Municipal Act and will be used to update Mailing Addresses for Property Taxation with the Township of Centre Wellington. Questions about this collection should be directed to Tammy Aiken, Tax Clerk, 1 MacDonald Square, Elora ON N0B 1S0 or 519-846-9691 x244.