



Mailing Address Update Form

Mailing Address Change Effective as of: _____

Registered Property Owner Information:

Owner(s) Name: _____

Phone #: _____

Municipal Address: _____

Roll Number: 4364 - _____ - _____ - _____ - _____ - 0000

Water/Sewer Account Number: _____ . _____

New Mailing Address Information:

Address:	Apt/Suite:
City:	Province:
Postal Code:	

I/We consent that the change of mailing address information may be shared with other municipal departments and the Municipal Property Assessment Corporation (MPAC).

I/We are aware that by updating my mailing address, the property tax and water/sewer account will be updated. The Town of Wasaga Beach is unable to send bills to separate mailing addresses.

Signature: _____ **Date Signed:** _____

Please return this form to the Treasury Department at Town Hall By:

Mail/ Drop Box/ In Person: 30 Lewis Street, Wasaga Beach ON L9Z 1A1

Email: revenue@wasagabeach.com

Personal information contained on this form is collected under the authority of the Municipal Act, S.O. 2001 c.25, s358 and will be used in the delivery and billing of water and wastewater services and will be treated as confidential. Questions regarding the collection of this information should be directed to the Treasurer of the Town of Wasaga Beach.