District Council of ELLISTON

PO BOX 46 ELLISTON SA 5670
PHONE: (08) 8687 9177
EMAIL: DCE@ELLISTON.SA.GOV.AU

EF04: Application Form

Change of Postal Address

Owner/Property Details:

Owner 1:		**Owner 2:**	
Owner 3:		**Owner 4:**	

Assess No:		**Address:**	
Assess No:		**Address:**	
Assess No:		**Address:**	
Assess No:		**Address:**	

New Postal Address:

Please select accounts to apply new postal address to:

☐ - Rates
☐ - Port Kenny Water Supply
☐ - Debtors
☐ - Creditors
☐ - Dogs and Cats (DACO)

Declaration:
"I declare that the information I have provided in this application is true and correct to the best of my knowledge"

Name:	
Signature:	
Date:	

Lodging:
By Email: dce@elliston.sa.gov.au
In Person: Council Office, 21 Beach Terrace, Elliston SA 5670
By Mail: District Council of Elliston, PO Box 46, Elliston SA 5670
**Requests for change of address over the phone will not be accepted.*