Town of Gawler

PO Box 130, Gawler SA 5118 Telephone: (08) 8522 9211 Email: council@gawler.sa.gov.au



REQUEST TO ALTER ASSESSMENT DETAILS

Notice is hereby given pursuant to Section 173 of the Local Government Act, 1999 (as amended) that

i/we tile owilei(s).		
Name/s:		
Postal Address:		
Contact Phone:		
Email Address:		
Request that the information held i	in the Assessment Book for our pro	perty located at:
Assessment:		
Property Address:		
be amended as per the following: Amend Existing Name	☐ Remove Existing Name	☐ Insert New Name
Surname:		
Given Names:		
Previous Name (if applicable):		
Postal Address:		
Contact Phone:		
Email:		
Surname:		
Given Names:		
Previous Name (if applicable):		
Postal Address:		
Contact Phone:		
Email:		
This request for alteration is made Marriage / Divorce Signature/s:		
e: This request will not change the industry to be made to the Lands Titles Office the Assessment Book, a copy of the Irrequest may deny the request for the all	and the appropriate fee paid. Where th Death Certificate will be required. The	e request is for the removal of a ratepa Chief Executive Officer, if dissatisfied
ICE USE ONLY		
hod of Notification:	Phone \square Email taken by $__$	Date: