



TOWN OF FORT ERIE  
NAME AND ADDRESS CHANGE  
TAXES  WATER

I HEREBY AUTHORIZE THE TOWN OF FORT ERIE TO CHANGE THE FOLLOWING INFORMATION:

ROLL # \_\_\_\_\_

WATER ACCOUNT # \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_

NAME IN C/O: \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

MAILING ADDRESS:

HOUSE # AND STREET: \_\_\_\_\_

CITY, PROVINCE: \_\_\_\_\_

POSTAL/ZIP CODE: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_

NOTES:  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

PROCESSED BY: (WATER) \_\_\_\_\_

DATE: \_\_\_\_\_

PROCESSED BY: (TAX) \_\_\_\_\_

DATE: \_\_\_\_\_

CONFIRMATION HAS BEEN RECEIVED THAT THE ABOVE CHANGES CAN BE SHARED WITH THE ASSESSMENT OFFICE.