1695 Emsdale Rd
PO Box 70
Emsdale, ON
P0A 1J0

Telephone: (705) 636-5941
Fax: (705) 636-5759
Website: www.townshipofperry.ca

CHANGE OF INFORMATION REQUEST FORM

Please list all properties that apply

Roll Number(s): _____ _____

Civic Address(es): _____ _____

PLEASE INDICATE BELOW THE DETAILS FOR THE CHANGE REQUEST

Previous mailing address:

Address Line 1 _____

Address Line 2 _____

City/Town, Province/State, Postal/Zip _____

☐ **Please change my mailing address to:**

Address Line 1 _____

Address Line 2 _____

City/Town, Province/State, Postal/Zip _____

☐ **Property owner is deceased – please change to THE ESTATE OF** _____

** Note: for this change to be processed this form must be accompanied by a copy of the death certificate **

Changes Requested / Authorized By:

_____ _____
Owner Name (please print) Phone Number

_____ _____
Owner Signature Date

**Note: If Power of Attorney is authorizing changes a copy of the Power of Attorney documents or a letter from the estate lawyer authorizing the individual must accompany this form unless documentation is already on file at the Township **

Please be advised that changes to the tax roll will not be acknowledged by the Municipal Property Assessment Corporation (MPAC) without the authorization of the owner(s) on title or legal documentation.

Office Use Only

Notified By (circle one): Email Counter Mail

Change Completed by: Date: Initials: