



# OVERSTRAND MUNICIPALITY

E-MAIL: [enquiries@overstrand.gov.za](mailto:enquiries@overstrand.gov.za)

## CHANGE OF ADDRESS

(Please complete if you need to change your address)

Erf No		Suburb		Account Number		
Registered Name/Surname					Initials	
ID No		(Copy of ID required)			Language	Eng Afr
E-mail address						
Contact No	Home		Work		Cell No	
Street Address of Premises						
PRESENT Postal Address (old)						
		Postal Code				
FUTURE Postal Address (old)						
		Postal Code				

Future Address as from:	(date)
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*If you prefer to receive your account via email, we still need a postal address.*

## ADD CELLPHONE FOR SMS SERVICE

(Please complete if you need to add your cell phone no to the SMS service)

Do you want to receive your account via	EMAIL		SMS		MMS	
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Cell No for SMS service	
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SIGNATURE

DATE

### OFFICE USE ONLY:

Name ID's:				
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Entered on:	DB 4	By:	
Date:			