



Township of Zorra

163 Brock Street PO Box 189 Thamesford Ontario N0M 2M0



519-485-2490



www.zorra.ca



admin@zorra.ca

Property Tax Change Request

Municipal Address: _____ Roll No 3227 ____ - ____ - _____

Effective Date of Change: _____

Type of Change Requested:

New Mailing Address:

Street Address: _____

City: _____

Province/Postal Code: _____

Remove Mortgage Company:

Name of Mortgage Company: _____

Other – please describe below:

Change authorized by:

Name (please print): _____

Daytime telephone number: _____

Email address (e-billing? Y/N): _____

Authorized by signature: _____

Date request submitted: _____

Return completed form to:

Melissa De Luca, Tax Collector 519-485-2490 Ext 7222 mdeluca@zorra.ca

Please allow up to ten days for processing.

NOTICE OF COLLECTION OF PERSONAL INFORMATION The personal information collected on this form is collected under the authority of the *Municipal Act, 2001, S.O. 2001, c. 25*, and will be used to process your request to make a change to your property tax account. Questions about this collection should be addressed to the Director of Corporate Services clerk@zorra.ca

For Township Use Only:

<input type="checkbox"/> Send to MPAC	CS Rep Initials	Account Number
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