

**TOWN OF OAKVILLE**

**NOTICE OF CHANGE OF ADDRESS**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

**TELE:** \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**\*For change of Name of Dependents, please contact Natasha Cowan at ext. 3082.**