



TOWNSHIP OF SEVERN

THE CORPORATION OF THE TOWNSHIP OF SEVERN

P.O. Box 159, Orillia, Ontario, L3V 6J3

ADDRESS CHANGE FORM

Roll Number: _____ Utility Acct Number: _____

Civic/911 Address: _____

Owner(s) Name: _____

New Mailing Address

Phone No.: _____ Email: _____

Signature: _____

Note: Persons who are not an owner, requesting changes to the property tax account or utility account must provide proof, that they have the authority to act on behalf of the owner. (ie Power of Attorney or Last Will and Testament).

Other Changes:

Name Change _____

(provide copy of Driver's License/Marriage Certificate)

Owner Deceased _____

(provide copy of Death Certificate/Registered Survivorship Application)

Spelling correction _____

Submit form by email: taxes@townshipofsevern.com or fax 705-327-5818
or mail to P.O. Box 159, Orillia, ON L3V 6J3