Name/ Address Changes Form



Customer ID #:			Name: First and last name				
							Legal Descript
			Plan, Block & Lot				
Long Legal:							
	SEC	QTR	TWP	RGE	MERIDIAN		
Info Received:	Telephone	Email	In Person				
Old Address:							
	Unit/	PO Box #	Street		Municipality	Postal Code	
Email Address:				Phone #:		Fax #:	
New Address:		PO Box #	Street		Municipality	Postal Code	
Email Address:			Phone #:		Fax #:		
Address Chang	ge will include	(Check all a	oplicable accoun	ts): Utiliti	es Taxation	Accounts Receivable	
NOTE: Inform o	customer to ch	ange addre	ess at AB Registri	es Land Tit	les as well (free of	charge).	
For Office Use:							
Location Form 0			n Completed by			Date	
Taxation Use:							
Input by				Date			

Wabasca Main Office

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