



Request for Change of Information

- Tax – email to tax@townofws.ca
- Water – email to water@townofws.ca

Effective Date _____ Property Address _____

Tax Roll # _____ Water Acct # _____

OWNER: New * Spelling Correction Change of Name * Other
 No Change

* Please attach supporting documents (i.e. copy of deed/land transfer, marriage/death certificate, or any Legal information to support this change)

ADDRESS: New mailing address Corrections to existing address
 No change

All Registered Owners are required to sign for a mailing address change

SIGNATURE OF OWNER: _____

SIGNATURE OF OWNER: _____

SIGNATURE OF OWNER: _____

EMAIL ADDRESS: _____ PHONE: _____

Office Use Only

Tax Account # _____ Water Account # _____

Date Changed _____ Date Changed _____