



P.O. Box 1120, Sundridge, ON P0A 1Z0
705-384-5819 Fax 705-384-5892
www.strongtownship.com

Change of Information Request

Roll Number: _____

Civic Address: _____

Legal Description: _____

Do you own more than one property in the Township of Strong? Yes No

If **Yes** please list all Roll Numbers of the other properties to which this change applies below:

Please indicate below the details for the change request:

New mailing address:

Address Line 1 _____

Address Line 2 _____

City/Town, Province, Postal Code _____

Property owner is deceased – please change to THE ESTATE OF _____

****Note:** For this change to be processed this form must be accompanied by a copy of the death certificate**

Changes Requested / Authorized By:

#1 Owner Name (please print)

#2 Owner Name (please print)

Dated (Owner #1)

#1 Owner - Check Lieu of Signing

#2 Owner - Check Lieu of Signing

Dated (Owner #2)

#1 Owner Phone Number

#2 Owner Phone Number

****Note:** All owners on title must authorize the change requested, please file multiple forms if necessary**

****Note:** If Power of Attorney is authorizing changes a copy of the Power of Attorney documents or a letter from the estate lawyer authorizing the individual must accompany this form unless documentation is already on file at the Township**

Please be advised that changes to the tax roll will not be acknowledged by the Municipal Property Assessment Corporation (MPAC) without the authorization of the owner(s) on title or legal documentation.

Office Use Only:

Change Completed by:

Date:

Initials: