

## OWNERS INFORMATION

Name(s): \_\_\_\_\_  
(PRINT NAME[S])

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Owner(s) Signature: \_\_\_\_\_  
(ALL OWNERS MUST SIGN ABOVE)

## TYPE OF REQUEST

- New** - This is a new address for a previously unaddressed property.
- Add** - This property has multiple buildings on the site. Add to existing address.
- Change** - Delete existing address & add new one.
- Update** Mailing Address (BC Assessment Authority)

## PROPERTY INFORMATION

PID: \_\_\_\_\_

Existing Address: \_\_\_\_\_

New Address: \_\_\_\_\_

Preference(s): \_\_\_\_\_

Reason for Address: \_\_\_\_\_

Change Request: \_\_\_\_\_

- Ownership / I.D. Confirmed

\_\_\_\_\_  
Kathleen Chan, Cartographer

***Address changes are subject to the discretion of the City of Delta and an applicable fee.***

*Personal information submitted through this form is protected under the Freedom of Information and Privacy Act and will be used only for its intended purpose.*

