



## CHANGE OF MAILING ADDRESS

Taxes  Water

I \_\_\_\_\_,

owner of \_\_\_\_\_ Grimsby, ON

Roll No. 2615

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request a change of mailing address for the above property to:

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Province

\_\_\_\_\_  
Postal Code

I also consent that the **Town of Grimsby** can provide my new mailing address to **MPAC**.  
(Municipal Property Assessment Corporation).

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Phone Number

Email address: \_\_\_\_\_

Access code/ PIN: \_\_\_\_\_ (Required)

Six-digit number located on the top left-hand corner of your Tax bill.

I authorize an administration fee of \$22.00 to be billed to my property tax account.

**\*Do not complete this form if you have sold your property.**

Once completed, please return to our office by fax to (905) 945-5010, by email to [taxes@grimsby.ca](mailto:taxes@grimsby.ca)  
or by mail/ in person to:

Town of Grimsby Attention  
Tax Department  
160 Livingston Ave  
Grimsby ON L3M 0J5