



For Office Use Only:

Application # \_\_\_\_\_

Receipt # \_\_\_\_\_

## New/Change of Address Application

**Applicant's Information** Fields that have an asterisk(\*) must be completed.

* Name of Applicant: _____	* Application Date: _____
* Mailing Address: _____	* Phone (Daytime): _____
	Phone (Cell): _____
* City: _____	Fax: _____
* Postal Code: _____	* E-Mail Address: _____

\* I am the applying to the City of Grande Prairie to change or alter the civic address for the dwelling located at:

Plan \_\_\_\_\_, Block \_\_\_\_\_, Lot \_\_\_\_\_.

Current Address if applicable, \_\_\_\_\_

I HEREBY CERTIFY THAT:

- 1) I am the owner of the subject property;
- 2) I am authorized to act on behalf of the applicant and that all statements contained herein are true. (Agents acting on behalf of the applicant MUST provide a signed letter of consent from the applicant and include the Agent's contact information).

\*Signed: \_\_\_\_\_ \*Date: \_\_\_\_\_

\* **Reasons for change** (Additional comments may be attached): \_\_\_\_\_

**Submit Completed Application to:** City of Grande Prairie, **ATTN:** Subdivision Officer, Engineering Services Department along with copy of plan.  
P.O. Bag 4000, 9505-112 Street, Grande Prairie, AB. T8V 6V3

### FOR OFFICE USE ONLY

- Application Fee Attached: \$250.00/per dwelling unit for changes
- Completed Application Rec'd By: \_\_\_\_\_ Date: \_\_\_\_\_
- Date change completed: \_\_\_\_\_ BY: \_\_\_\_\_

This personal information is being collected under the Authority of Section 33(c) of the Freedom of Information and Protection of Privacy Act and will be used to administer a request for a change of address or new address is required. If you have any questions about the collection Contact the Legislative Services Manager of the City of Grande Prairie, 780-538-0300.