

PROPERTY NO:

TENANT NO:



CHANGE OF TENANCY FORM

NAME OF TENANT:
(First Name) (Surname)

SUPPLY ADDRESS:

TOWNSHIP: PHONE:

AGENT:

OWNER:

DATE COMMENCED: DATE VACATED:

PREVIOUS RENTAL ADDRESS: FORWARDING ADDRESS:
.....
.....

WILL THEY BE A TENANT AT THIS FORWARDING ADDRESS? YES / NO

CENTRELINK CUSTOMER REF. NO. (CRN):

I WOULD LIKE TO PAY BY CENTREPAY? YES / NO AMOUNT: \$.....p/f.

DATE OF BIRTH:
Note: - If you wish to pay by Centrepay a contact number must be provided.

REFEREE'S NAME:

ADDRESS:

TELEPHONE: RELATIONSHIP:

Note: - Referee may be contacted during occupancy to confirm the details provided are true and correct.

APPLICANT'S SIGNATURE: DATE:

OFFICE USE ONLY

Meter No.....	Commencement	Vacating
Date to be Read	/ /	/ /
Reading		
Previous Reading		
Used		
Charge		