



Town of Penetanguishene
10 Robert St. West, P.O. Box 5009
Penetanguishene, ON L9M 2G2
Tel. (705) 549-7453
Fax (705) 549-3743
Email: finance@penetanguishene.ca

CHANGE OF MAILING ADDRESS FORM

Name of Property Owner(s): _____

Roll Number: 4372 _____

Property Address: _____

New Mailing Address: _____

Effective Date: _____ (DD/MM/YYYY)

Email: _____ Phone: _____

Beginning February 2021, municipalities will be required to confirm they have property owner consent before sharing mailing address change updates with MPAC. This requirement helps ensure MPAC complies with the *Municipal Freedom of Information and Protection of Privacy Act (MFIPPA)*.

As the property owner, I consent to The Town of Penetanguishene sharing my new mailing address with MPAC.

_____ Yes

_____ No

Signature of Property Owner

Date