

Request for Mailing Address Change

This form is used to notify PVSC of mailing address updates. It cannot be used to make ownership changes.

Property and Customer Information

Parcel ID(s): _____ , _____ , _____ , _____
 Customer #: _____ , _____ , _____ , _____
 Name: _____
 _____ Owner #: _____
 Attention: _____

New Mailing Address

Address format: Canadian US Standard International
 Civic #: _____ Street direction: _____
 (house #) (i.e. SW / East / North etc.)

Street name: _____ Street type: _____
 (i.e. Avenue / Road / Blvd etc.)

Building type: Apartment Suite Unit Unit/Apartment #: _____

Address 1: _____ *International use only*

Address 2: _____ *(PO Box / RR #)*

Address 3: _____ *International use only*

City / Community: _____

Province / State: _____ Country: _____ Postal / Zip Code: _____

Requested by: _____ Date: _____ Phone #: _____
(Signature required) *(Required)*

Office use only

Municipality: _____ Date sent: _____

Input by: _____ Jur: _____ Date input: _____

Submit completed forms to PVSC by:	Questions? Contact PVSC:
Mail: 6 – 15 Arlington Place, Truro NS, B2N 0G9 Fax: 1-888-339-4555 (within North America) 1-902-893-6101 (outside North America) Email: inquiry@pvsc.ca	1-800-380-7775 (within North America) 1-902-893-5800 (outside North America) www.pvsc.ca

Please call PVSC or check www.pvsc.ca to confirm office locations and hours of operation.