



TEL: 403-851-2522

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FAX: 403-932-6032

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taxes@cochrane.ca

**Assessment / Taxation  
Change of Mailing Address**

Tax Roll: \_\_\_\_\_

Name: \_\_\_\_\_

Property Address : \_\_\_\_\_

Effective Month:

New Mailing Address:

Phone Number :

Cell:

E-mail Address:

Additional Information:

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please complete all areas of the form:

Tax Roll number – located on your Annual or Supplementary Assessment and Tax Notice

Name – include name of property owners

Property Address – physical address location

Effective Month – please indicate when the information should be changed

New Mailing Address – please be sure to include your postal code

Additional Information – any other pertinent information

**Sign, date and return the form to the Town of Cochrane Administration Office, Cochrane  
RancheHouse, 101 RancheHouse Road....or by fax 403-932-6032. If you have any  
questions on completing the form, please call the tax department at 403-851-2522.**