

**REQUEST FOR RURAL ADDRESSING**

**(CUSTOMER SERVICE)**

Owners Name:- Mr/Mrs/Miss/Ms \_\_\_\_\_  
(Please Circle) Surname Given Names

Property Address:- Lot No \_\_\_\_\_ DP \_\_\_\_\_ Section \_\_\_\_\_

\_\_\_\_\_ Road / Street / Lane etc

\_\_\_\_\_ Locality / Suburb / Village \_\_\_\_\_ Postcode

Default mailing address: - \_\_\_\_\_

\_\_\_\_\_ Signature Daytime Contact No:- \_\_\_\_\_

Date:- \_\_\_\_\_

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**OFFICE USE ONLY**

Receipt No: \_\_\_\_\_ Date: \_\_\_\_\_

Property Number: \_\_\_\_\_

Customer Service Officer: \_\_\_\_\_

**Please return to Seon Millsteed when completed.**