SENGKANG TOWN COUNCIL

Main Office Blk 266 Compassvale Bow #01-06 Singapore 540266
Branch Office Blk 156A Rivervale Crescent #01-01 Singapore 541156
Tel 6590 9700 Fax 6385 0930
Website www.sktc.sg Email enquiry@sktc.sg

CHANGE OF CORRESPONDENCE ADDRESS FORM

Please submit the completed form to any Sengkang Town Council's offices.
For any enquiries, please contact the Finance Dept at 6590 9700.

(A) APPLICANT'S PARTICULARS	
Date of Submission: D D M M Y Y	**Town Council Reference No.:**
PROPERTY INFORMATION	
Name: *1st Registered Lessee*	**Partial NRIC No.:** *Provide only last 3 digits & last alphabet NRIC, FIN or other National Identification Number*
Contact No:	**Email Address:**
Name: *2nd Registered Lessee*	**Partial NRIC No.:** *Provide only last 3 digits & last alphabet NRIC, FIN or other National Identification Number*
Contact No:	**Email Address:**
Property Address: Postal Code:	
Correspondence Address: Postal Code:	
NOTE: ▪ **The information in this form shall supersede all relevant information in the Town Council's records.** ▪ **The Town Council reserves the right to reject any incomplete information in this form.**	

(B) ACKNOWLEDGEMENT OF APPLICANT(S)	
1st Registered Lessee's Signature:	**2nd Registered Lessee's Signature:**

(C) FOR OFFICAL USE ONLY		
Date Received:	**Effective Date:**	**Verified By:** *Name & Initial*