

# CHANGE OF CONTACT DETAILS

## CLIENT DETAILS

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

\_\_\_\_\_

LANDLORD  TENANT

HOME PHONE: \_\_\_\_\_ MOBILE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**Lodge this form:**

In person, Luton Properties is located at **1/33 Hibberson Street, Gungahlin ACT 2912**

Mail to:

**Luton Properties  
PO BOX 970  
Gungahlin  
ACT 2912**

Email to: **belconnen@luton.com.au**

## OFFICE USE ONLY

RECEIVED BY (STAFF NAME): \_\_\_\_\_ TIME: \_\_\_\_\_

FORMAT EMAIL/MAIL: \_\_\_\_\_

SIGNATURE OF PROPERTY MANAGER: \_\_\_\_\_ DATE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

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