



Municipalité de La Pêche

1, route Principale Ouest
La Pêche, Québec J0X 2W0
Téléphone: 819 456-2161
Fax: 819 456-4534

CHANGE OF ADDRESS REQUEST

Thank you for filling out this change of address request and send it by email at d.robert@villelapeche.qc.ca or by fax at 819 456-4534.

I, the undersigned, _____, advise the Municipality of La Pêche of my change of address to be effective in _____.

Address of the property:

My old mailing address was:

My new mailing address will be:

Phone: _____

Email: _____

Signature: _____

Date: _____

Received by: _____