

## **INSTRUCTIONS: Business Form**

Please submit this information to the Inquiry Desk at 2071-2<sup>nd</sup> Avenue, Main Administration Building or mail to:

Inquiry Desk C21-A  
Department of Community Services  
Box 2703  
Whitehorse, YT  
Y1A 2C6

1. **Date to take effect:** Specify the date that you want your address change to take effect
2. **Previous Address:** Provide full address of last place of residence. Mailing address must be provided if different from street address. Please include the postal code.
3. **New Address:** Provide full address of current place of residence. Mailing address must be provided if different from street address. Please include the postal code.
4. **Registered Business Name:** Provide all legal business names.
4. **Proprietor/ Partner Name(s):** Provide the name(s) of owner(s)
5. **Specify which departments/ branches you wish to notify:** Place a check mark in the appropriate boxes of the departments/branches you wish to notify. Note: you must already do business with the department.
6. **Vehicle Registration:** Identify all plate numbers that you want changed
7. **Land Information:** If you own land, please provide all necessary information
8. **Signature:** Authorized personnel may sign the form

**Note for Non profit and Societies:** A letter signed by two Board members e.g. . President and Treasurer is required in order to complete the change of address form.