



## Plumbers Licensing Board

### CHANGE OF ADDRESS

Licence number PL/TL/RP \_\_\_\_\_ Date of Birth \_\_\_\_\_

#### Personal details

Full (legal) name \_\_\_\_\_

#### *Current address*

Residential address \_\_\_\_\_

Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Postal address (if applicable) \_\_\_\_\_

Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

#### *Telephone*

Home \_\_\_\_\_ Mobile \_\_\_\_\_ Work \_\_\_\_\_

Email \_\_\_\_\_

#### Employment details

Current Employer/Business name \_\_\_\_\_

ABN/ACN \_\_\_\_\_

Employers/Business address \_\_\_\_\_

Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

***Note: a change of address can only be lodged by the holder of the licence. A change of address by a third party will not be accepted unless the Board has received prior written consent from the licensee.***