



ONGWEDIVA TOWN COUNCIL

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APPLICATION FOR CHANGE OF NAME (Change of surname, Name and Spelling Mistake Form)

Account No

ERF

SURNAME

FULL NAME/S

ID / PASSPORT NO

POSTAL ADDRESS

Contact Details :

Tel: _____ (W) fax _____ (W)
Tel: _____ (H) Fax _____ (H)
Mobile no : _____
E-Mail: _____

Client's Signature: _____ Processed by: _____

DATE: _____ Date : _____

NB: PLEASE ATTACH PROOF OF OWNERSHIP , REGISTRATION LETTER FROM THE LAWYER , LETTER FROM THE BANK IN CASE OF THE DECEASED, THE EXECUTOR LETTER, CERTIFIED COPY/IES OF ID/PASSPORT AND POLICE SWORN DECLARATION FOR OUR RECORD PURPOSES.

