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| A picture containing icon  Description automatically generated | 553 Hay Street, PERTH Western Australia 6000Office hours: 8.30 am – 4.30 pm (Mon-Fri)Tel: 1300 746 116Fax: (08) 9222 6617Email: public.trustee@justice.wa.gov.auWebsite: www.publictrustee.wa.gov.au |

Update Contact Details

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| --- |
| 1. Are you completing this form:
 |
| **For yourself** **[ ]  »** | Complete questions: 2, 3, and 6 |
| **or** |  |
| **On behalf of another person** **[ ] »** | Complete **all** questions |

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| 1. Previous details registered with the Public Trustee
 |
| Title:  | First name: |       | Surname: |       | Date of birth: |   / /   |
| Address: |       | Postcode: |       |
| Telephone: |       | Mobile: |       |
| Email: |       |

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| 1. New details to be updated with the Public Trustee
 |
| Title:  | First name: |       | Surname: |       | Date of birth: |   / /   |
| Address: |       | Postcode: |       |
| Telephone: |       | Mobile: |       |
| Email: |       |

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| 1. I am completing this form on behalf of another person:
 |
| Your name: |       |
| Telephone: |       | Mobile: |       | (Signature) |

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| 1. Authority to update contact details on behalf of person registered with the Public Trustee
 |
| [ ]  Guardian | [ ]  Order from SAT | [ ]  Order from Public Advocate | [ ]  Enduring Power of Attorney |
| [ ]  Other (please list): |       |

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| 1. Identification requirements:
 |
| [ ]  Original ID shown | [ ]  Certified ID attached  |
| **Please refer to Public Trustee** [**Identification Requirements**](https://www.justice.wa.gov.au/_files/pto/PTO-identification-requirements.pdf) **document** |

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| **Office Use Only** |
| Staff member name: |  | Date received: |  / / |
| Entered into MATE [ ]  Yes [ ]  No | ID requirements: [ ]  Sighted [ ]  Attached |