

**Change of Principal Business Address Form
(No Other Change)**

Please send request by fax at 613-946-2168

or by mail: Licensing
Office of the Superintendent of Bankruptcy Canada
Heritage Place
155 Queen Street, 4th Floor
Ottawa ON K1A 0H5

Name of trustee: _____

In the case of a corporate trustee, each individual trustee within the corporation must also complete an address modification request.

License number: _____

Date of change of address: _____

Please be informed of a change of address as follows:

Building

No.

Street

Suite

City

Province

Postal Code

Telephone

Fax

Email address

Name of the person sending notice: _____

Telephone number: (_____) _____

Date of present notice: _____