



## Change of Address Form

I, \_\_\_\_\_ authorize the company and/or its affiliates/subsidiaries to change the address of my owner account.

Owner/BA Number: \_\_\_\_\_ or Lease Number: \_\_\_\_\_

last 4 Digits of Social Security # / Taxpayer ID: \_\_\_\_\_

Name on the Account: \_\_\_\_\_

Your Name (if you are not the owner): \_\_\_\_\_

(If not previously provided, please attach documentation establishing your relationship with the Account Owner for review)

Old Address	New Address
<i>Address</i>	<i>Address</i>
<i>City/Locality/Village</i>	<i>City/Locality/Village</i>
<i>State/Province/Region</i>	<i>State/Province/Region</i>
<i>Zip</i>	<i>Zip</i>
<i>Country</i>	<i>Country</i>
	<i>Phone</i>
	<i>Email</i>

Apply this change to my:  Check/Revenue     Correspondence Address  
 If neither blank is selected, both addresses will be updated.

**All fields must be complete, or the change of address cannot be processed. After the company's receipt and approval, the change of address will become effective soon thereafter.**

### TERMS OF ACCEPTANCE & SIGNATURE

I, the requestor for this Change of Address Form, warrant the truthfulness of the information provided in this submission.

\_\_\_\_\_

First Name                                      Middle Initial    Last Name                                      Suffix

\_\_\_\_\_

Date

*Please email this form to the company that holds your leasehold/mineral interest*