



Name Change Authorization Form

Current Account Information

Reason for change: Purchase: Merger:
 Other: - Please Explain: _____

Company Name: _____ Ticket Number: _____
 Street Address: _____ Fax Number: _____
 Apt/Suite: _____ Effective Date: _____
 City, State, Zip: _____

New Account Information

****PLEASE PRINT****

New Company Name: _____ Tax ID/SSN: _____

Billing Address: _____

Contact Number: _____

The signature below authorizes the transfer of account ownership as noted. Both parties agree that the new owner assumes full responsibility for the account as of the date of the name change. Full responsibility for the account includes account balances, services, equipment, existing contracts and deposits, if applicable. **Account change subject to credit approval.**

Current Owner Name and Signature

Printed Name: _____ Date: _____

Signature: _____ Position: _____

New Owner Name and Signature

Printed Name: _____ Date: _____

Signature: _____ Position: _____

Previous Address(s): _____

INTERNAL USE ONLY

Approved: Declined: Deposit Amount: \$ _____

Completed By: _____

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Account Security

Instructions: For the security of your account, enTouch requires addition security information with a preferred email address and two back up questions. Please note anyone who knows this information will have full access to your account.

Preferred Email Address: _____

Please complete two (2) of the following questions:

A. What is your favorite movie?

B. What is your favorite cartoon character?

C. What is the name of your first pet?

D. What is the favorite place you have visited?

E. What is your favorite food?
