

Account Change Form



Instructions

In order to process your request, all fields in both columns must be complete, including FEINs and ownership information. IntelliCorp cannot process requests for account changes without information in all fields along with a signature and date. **PO Box Addresses are prohibited.**

CURRENT COMPANY INFO		UPDATES REQUESTED	
1. Legal Company Name		Legal Company Name	
2. DBA (If Applicable)		DBA (If Applicable)	
3. Address		Address	
4. City/State Zip Code		City/State Zip Code	
5. Direct Business Phone		Direct Business Phone	
6. Billing Address		Billing Address	
7. Billing Contact		Billing Contact	
8. Billing Email Address		Billing Email Address	
9. Primary Contact Name		Primary Contact Name	
10. Primary Contact Email		Primary Contact Email	
11. Federal Tax ID:		Federal Tax ID:	
		Has Ownership Changed?	Yes <input type="checkbox"/> No <input type="checkbox"/>

USER ACCESS UPDATES (IF APPLICABLE)

NEW USER ACCESS		DISABLE USER ACCESS	
1. Name		Name	
2. Email Address		Email Address	
3. Phone		Phone	
1. Name		Name	
2. Email Address		Email Address	
3. Phone		Phone	

Signature of Owner/Officer or Legally Authorized Representative _____

Title

Date

SEND COMPLETED, SIGNED AND DATED FORM VIA EMAIL TO CREDENTIALING@INTELLICORP.NET OR FAX AT 216-450-5105