

Please Return To:  
 Fax: 903-453-0784  
 Phone: 903-455-1715  
 800-541-2662

Or Mail To:  
 Farmers Electric Cooperative  
 2000 East I-30  
 Greenville, Texas 75402



## NAME CHANGE REQUEST

Required written proof for a change can be a release from the former party, an addition of a co-applicant, divorce certificate, marriage certificate, and death certificate or heirship affidavit.

Please provide the following information and return to our Customer Service department. If you have any questions concerning the above, please call 903-455-1715 or toll free 1-800-541-2662 and request to speak to a Customer Service Representative.

Farmers EC Acct#:			
Name:	Last	First	MI
DL#:	DOB:		SS#:
Home/Primary Phone #:	Wk #		Cell #
Co-Member Name:	Last	First	MI
DL#:	DOB:		SS#:
Home/Primary Phone #:	Wk #		Cell #
Billing Address:			
911 Address if different from billing address:			
Description of Service: (Ex. Brown Mobile Home, Red Brick House, personal shop, etc.)			

YOUR SIGNATURE INDICATES ACCEPTANCE OF ALL RESPONSIBILITIES, LIABILITIES AND ASSETS FOR THE ABOVE CAPTIONED ACCOUNTS.

A COPY OF A VALID DRIVER'S LICENSE OR GOVERNMENT ISSUED PICTURE IDENTIFICATION REQUIRED FOR EACH SIGNATURE. IDENTIFICATION IS SUBJECT TO VERIFICATION AND VALIDATION VIA CREDIT REPORTING AGENCY.

\_\_\_\_\_  
 MEMBER SIGNATURE

\_\_\_\_\_  
 CO-APPLICANT SIGNATURE