



Name Change Form

Old Owner Name: _____
(Please Print)

New Owner Name: _____
(Please Print)

Owner Number: _____

Last Four Digits of SSN or TIN: _____

Current Address Information:

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Check here if this is a new address & you would like Four Corners Petroleum to update our records

Old Address:
(if applicable) Address: _____

City: _____ State: _____ Zip Code: _____

Contact Information:

Home: _____ **Fax:** _____ **Cell:** _____

Email: _____

Type of document attached:

- Marriage License
 Divorce Decree
 Other (please specify) _____

SIGNATURE: _____ **DATE:** _____

Please provide any special instructions: _____