

## CHANGE OF ADDRESS FORM

Today's Date:

For questions please call your representative

### CUSTOMER INFORMATION

Account Name:

Account #:

Client's Phone Number:

Client's Cell Phone Number:

Client's Email:

Client's Fax Number:

OLD LEGAL address:

OLD MAILING address (if different):

NEW LEGAL address:

NEW MAILING address (if different):

Authorized Signature

Authorized Signature

Authorized Signature

Representative's Name: \_\_\_\_\_

Representative's Signature: \_\_\_\_\_

**REP Certification (Sign above & include Rep number)** Rep certifies that he/she **has confirmed verbally with client** and that ALL signatures are legitimate and compare favorably with the one(s) on file; has checked with the home office for verification of state registration or country approved list. If a **PRG** domestic account, Rep certifies that he/she is registered in the MAILING ADDRESS STATE as **broker**. If a **PRAG** account, Rep certifies that, if required, he/she is registered in the MAILING ADDRESS STATE as **advisor**.

**ALL ACCOUNT HOLDERS MUST SIGN**

**Note: Account Mailing address (address where you would like your mail sent)**

### FOR INTERNAL USE ONLY

If a PRG domestic account, is the REP registered in the MAILING ADDRESS STATE?

Yes  No  N/A Foreign Address

Verified by \_\_\_\_\_

If a PRAG account, is the REP (if required) registered in the MAILING ADDRESS STATE (always required for HI, LA, NE, NH and TX); or does the DE MINIMIS rule apply (Not applicable for WY)?

Yes  No  N/A Foreign Address

Verified by \_\_\_\_\_

Approved by \_\_\_\_\_