

DATE _____

CLIENT NAME _____

REASON FOR CHANGE – PLEASE CHECK ALL THAT APPLY

- | | | |
|---|---|---|
| <input type="checkbox"/> Sales | <input type="checkbox"/> Transfer | <input type="checkbox"/> Conveyance of Ownership Interest |
| <input type="checkbox"/> Merger | <input type="checkbox"/> Consolidation | <input type="checkbox"/> Formation of a New Entity
(to add to the current existing policy) |
| <input type="checkbox"/> Name Change | <input type="checkbox"/> Address Change | <input type="checkbox"/> Business Closed |
| <input type="checkbox"/> Combination of Separate Entities | | |

COMPANY DATA CHANGE

ITEM TO CHANGE	FROM	To
<input type="checkbox"/> Company Name		
<input type="checkbox"/> Company Address		
<input type="checkbox"/> Owner Name		
<input type="checkbox"/> Owner Title		
<input type="checkbox"/> Percentage of Ownership		

ADDITIONAL OWNER(S)

NAME	TITLE	PERCENTAGE OF OWNERSHIP

I acknowledge the information listed above is true and accurate and I authorize Fortune Business Solutions to make the above listed changes to all applicable policies and/or agreements.

CLIENT SIGNATURE _____ DATE _____