

**VERNON E. FAULCONER, INC.**



P O BOX 7995  
TYLER, TX 75711  
TEL (903) 581-4382  
FAX (903) 581-1515 Email: revenue@vefinc.com

**ADDRESS CHANGE FORM**

**DATE:** \_\_\_\_\_

<b>OWNER NUMBER:</b>	
<b>OWNER NAME:</b>	
<b>UNIT NUMBER:</b>	
<b>UNIT NAME:</b>	
<b>COUNTY/STATE:</b>	

Company policy requires that an address change request be in writing and signed **by the owner**. Please verify by signing the bottom of this letter, noting any corrections, and returning it to us. If you are a Power of Attorney and signing for the owner, you must provide a copy of your Power of Attorney with this form.

<b>OWNER'S CURRENT ADDRESS:</b>	<b>SIGNATURE:</b>
	<b>SOCIAL SEC. NO. :</b>
<b>TELEPHONE NO.:</b>	<b>DATE:</b>
<b>FAX NO.:</b>	<b>EMAIL ADDRESS:</b>

**COMMENTS:** \_\_\_\_\_  
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