



NOTIFICATION OF CHANGE OF INFORMATION

PLEASE TYPE OR PRINT ALL INFORMATION CLEARLY

Fill out the following information and send to the Bureau by MAIL to the address listed above.

Household Mover's MTR: _____

Name of Household Mover: _____

As shown on the permit, certification or application

CHECK ALL THAT APPLY (NOTE: if you are changing more than one address, and the new addresses are different from one another, use separate forms for each change.)

- Change of Mailing Address
- Change of Physical Address (Main office where records are kept; do not provide P.O.Boxes)
- Change of Terminal Address (Location where vehicles are kept; do not provide P.O. Boxes)
- Change of Phone Number
- Change of Fictitious Business Name (DBA)
- Addition of Fictitious Business Name (DBA) – **must include the DBA filing with county clerk.**

OLD ADDRESS / PHONE NUMBER / DBA

Address, City, State and Zip Code

Area Code and Phone Number

Fictitious Business Name (DBA)

NEW ADDRESS / PHONE NUMBER / DBA

Address, City, State and Zip Code

Area Code and Phone Number

Fictitious Business Name (DBA)

Signature of Owner or Officer

Date

Title