



## CALNRG OPERATING, LLC CHANGE OF ADDRESS REQUEST FORM

I, \_\_\_\_\_, authorize CalNRG Operating, LLC, or its affiliates and subsidiaries, to change the address on my owner account.

**Owner Number:** \_\_\_\_\_ **Last 4 Digits of Social Security No./Taxpayer ID:** \_\_\_\_\_

**Name on the Account:** \_\_\_\_\_

**Your Name (if you are not the owner):** \_\_\_\_\_

*(if not previously provided, please attach documentation establishing your relationship with the Account Owner for CalNRG's review.)*

Old Address	New Address
Address:	Address:
City/Locality:	City/Locality:
State/Province:	State/Province:
Zip Code:	Zip Code:
Country:	Country:
	Phone:
	Email:

Apply this address change to my:  Check/Revenue Address  Correspondence Address

*If neither box is selected, both addresses will be updated.*

All fields must be complete, or the change of address request cannot be processed. Forms can be mailed to CalNRG at Attn: Owner Relations., 1746 F South Victoria Ave., #245, Ventura, CA 93003 or emailed to [owner@calnrg.com](mailto:owner@calnrg.com).

### TERMS OF ACCEPTANCE & SIGNATURE

I, the requestor for this Change of Address form, warrant the truthfulness of the information provided in this submission and my signature is below.

**Signed:**

\_\_\_\_\_  
**Name:** \_\_\_\_\_

\_\_\_\_\_  
**Date:** \_\_\_\_\_