

Residential Member Profile Change Request

Please complete the Primary Member section for all change requests. If adding a Co-Member, complete the Co-Member section. Return your form by email, fax or mail at one of the addresses shown at the upper-right corner. For questions or assistance, please call Member Care at 903-455-1715 or email us at MemberCare@FarmersElectric.coop.

Check the type of change you are requesting. Supporting documentation may be required if stated below. All requests are subject to a soft credit check.

- ☐ **Add Co-Member** (convert Single Membership to Joint Membership).
- ☐ **Co-Membership to Single Membership:** provide completed Residential Membership Release Form.
- ☐ **Estate Name:** enter Executor or Administrator's information at Co-Member section; please provide a copy of Death Certificate.
- ☐ **Last Name (Surname) Change:** provide a copy of the court certified legal document supporting the name change.
- ☐ **Spousal Name Change:** please provide a copy of Death Certificate.
- ☐ **Membership Transfer:** provide completed Residential Membership Release form.

Primary Member

Account No.: _____ Customer No. (If known.): _____ Date: _____

Estate Of (If Applicable) _____

Last Name: _____ First Name: _____ MI: _____

DL# _____ DL State: _____ SSN _____ DOB (mm/dd/yyyy) _____

Home# _____ Cell# _____ Email _____

Billing Address (Street/PO Box, City, State, Zip) _____

Co-Member

Last Name: _____ First Name: _____ MI: _____

DL# _____ DL State: _____ SSN _____ DOB (mm/dd/yyyy) _____

Home# _____ Cell# _____ Email _____

Service Location

911 Address if Different From Billing Address _____

Description: (e.g.,) shop, home, barn, house _____

Your signature(s) constitute your acceptance of all provisions relating to the rights, powers, terms, conditions, obligations, responsibilities and liabilities of membership, severally or jointly in cases of a co-membership.

Primary Member Signature

Co-Member Signature