



ACCOUNT INFORMATION CHANGE FORM

For your convenience, account information changes can be made using this form. Simply print this form, complete it, and sign it. Then fax the completed form to (920) 236-4038. We've even provided a fax cover sheet for your convenience. Unfortunately, for security reasons, we are not able to accept changes over the internet at this time.

If you require immediate assistance, please contact us at (800) 678-1411

ACCOUNT NAME		DATE	TIME
SITE ADDRESS		TELEPHONE	
CITY		ACCOUNT NUMBER	
STATE	ZIP CODE	PASSCODE	
REQUESTED BY			

CHANGE OF INFORMATION -- Use the area below to indicate changes you wish to have made.

This change is:
 Permanent -- Effective on: _____
 Temporary -- Effective from: _____ to _____

Change the main password from _____ **to** _____

Add, change or delete the passcodes from the following people:

User: _____ **Code:** _____ **Add** **Change** **Delete**

User: _____ **Code:** _____ **Add** **Change** **Delete**

User: _____ **Code:** _____ **Add** **Change** **Delete**

Add, change or delete the following people from my call list:

User: _____ **Phone:** _____ **Add** **Change** **Delete**

User: _____ **Phone:** _____ **Add** **Change** **Delete**

User: _____ **Phone:** _____ **Add** **Change** **Delete**

Add, change or delete the usercodes from my security system:

User: _____ **Code:** _____ **Add** **Change** **Delete**

User: _____ **Code:** _____ **Add** **Change** **Delete**

User: _____ **Code:** _____ **Add** **Change** **Delete**

Mail Account Information -- Attn: _____

Customer Signature	Print Name	Date
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This form must be signed by an authorized Client. All changes must be submitted to Accu-Com in writing by an authorized Client.

FOR OFFICE USE ONLY

Entered By	Date	Time
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