



## Business Name Change Affidavit

Before me this day personally appeared \_\_\_\_\_,  
who being duly sworn states:

1. I/we have the following customer account with Bonita Springs Utilities, Inc.

- Membership/Account No.: \_\_\_\_\_
- Name on Account: \_\_\_\_\_
- Member Mailing Address: \_\_\_\_\_
- Service Address: \_\_\_\_\_
- Telephone No.: \_\_\_\_\_
- E-mail Address: \_\_\_\_\_
- Social Security No. or EIN No.: \_\_\_\_\_

2. I/We request that the name on this account be changed to:

- New Name on Account ("Transferee"): \_\_\_\_\_
- Member Mailing Address: \_\_\_\_\_
- Telephone No.: \_\_\_\_\_
- E-mail Address: \_\_\_\_\_
- Social Security No., or EIN No.: \_\_\_\_\_

3. I/We am/are providing a completed **Form W-9 Request for Taxpayer Identification Number and Certification** and the required documents based on the following:

\_\_\_\_\_ Business name has legally changed. I have attached Fictitious Name or Amendment to the Articles of Incorporation.

\_\_\_\_\_ Business merged with another. I have attached Articles of Merger or Amendment to the Articles of Incorporation.

4. I/We understand that the membership and any capital credits on the above-referenced account will **be transferred** to the new entity and hereby assign all capital credits allocated to the above-referenced account to Transferee and completely discharge Bonita Springs Utilities, Inc., from any further obligation to me/us for such capital credits.

5. I am authorized to sign this form and agree to indemnify and hold harmless Bonita Springs Utilities, Inc., from any and all liability, claims or damages incurred by Bonita Springs Utilities, Inc., for its actions taken in reliance upon this form, including all costs and attorney's fees incurred by Bonita Springs Utilities, Inc.

6. All statements made and information provided herein are true and correct.

\_\_\_\_\_  
**Officer Signature/Title**

\_\_\_\_\_  
**Officer Signature/Title**

**State of:**

**County of:**

Signed and sworn to (or affirmed) before me on \_\_\_\_\_ by  
\_\_\_\_\_, who is personally known to me or who has produced  
\_\_\_\_\_ as identification.

**NOTARY PUBLIC**

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

**My Commission Expires:** \_\_\_\_\_