**CHANGE OF COMPANY / ACCOUNT INFORMATION FORM**

1. **Please type in the required information (Do not hand-write).**
2. **Print as PDF and email the signed form to** [**customeradmin@crimsonlogic.com.sg**](mailto:customeradmin@crimsonlogic.com.sg)

***\*Mandatory Fields***

|  |
| --- |
| **SECTION 1: INFORMATION ON COMPANY AND REQUESTOR PERSONNEL** |

|  |  |  |  |
| --- | --- | --- | --- |
| UEN (Unique Entity Number) \* |  | Account ID\* |  |
| Company Name\* |  | | |
| Requestor's Name\* |  | Contact Number\* |  |
| Email Address\* |  | | |

|  |
| --- |
| **SECTION 2: INFORMATION TO BE UPDATED** |

|  |  |
| --- | --- |
| Company Name |  |
| Company Address |  |

|  |  |  |
| --- | --- | --- |
| **Particulars/Role** | **Contact Person** | **Billing Contact#**  ***(to receive billing notification email)*** |
| Name  *(Please underline surname)* |  |  |
| Contact number |  |  |
| Designation |  |  |
| Email Address |  |  |

*#General Finance or Account Department email address*

|  |
| --- |
| **SECTION 3: AUTHORISATION** |

I certify that all the above information given are correct and true:

*(To be signed by Manager and above.)*

|  |  |  |  |
| --- | --- | --- | --- |
| Name\* |  | Company Stamp\* |  |
| Designation\* |  |
| Signature\* |  | Date\* (dd/mm/yyyy) |  |

|  |
| --- |
| **SECTION 4: FOR OFFICIAL USE ONLY** |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Action By (Name, Signature, Date):  NBS Billing Medium (WEB or EMAIL): |  |  |  |  |  |  |  |  |  |  |  |

*changeofcoinfo Rel3 - December, 2023*