



Customer Contact Change Form

Some account changes, including changes in ownership or company name, may require completion of a new Customer Application Package. Your Sales Representative will contact you if any further documentation is required.

CUSTOMER #: _____

EFFECTIVE DATE: _____

OWNER INFORMATION

Name _____ Percentage Owned _____
Address _____
City _____ State _____ Zip _____
Email _____ Cell Phone _____
Removing Adding Web Access Full Restricted

ADDITIONAL OWNER (IF APPLICABLE)

Name _____ Percentage Owned _____
Address _____
City _____ State _____ Zip _____
Email _____ Cell Phone _____
Removing Adding Web Access Full Restricted

MANAGER

Name _____ Percentage Owned _____
Address _____
City _____ State _____ Zip _____
Email _____ Cell Phone _____
Removing Adding Web Access Full Restricted

BUYER

Name _____ Percentage Owned _____
Address _____
City _____ State _____ Zip _____
Email _____ Cell Phone _____
Removing Adding Web Access Full Restricted

RETURNS / OS&D CLAIMS

Name _____ Percentage Owned _____
Address _____
City _____ State _____ Zip _____
Email _____ Cell Phone _____
Removing Adding Web Access Full Restricted

AUTHORIZED SIGNATURE

Authorized Signature _____

Date _____

Please send completed form to AR@Hydrofarm.com