



## CHANGE OF ADDRESS REQUEST

Owner Number: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Contact Name (if different): \_\_\_\_\_

Old Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

New Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Last 4 of SSN/Tax ID#: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### **Please Mail, Email, or Fax to:**

SOGC, Inc.

PO Box 31822

Salt Lake City, UT 84131-0822

**[ownerrelations@sinclairoil.com](mailto:ownerrelations@sinclairoil.com)**

Fax: 801-524-2877