

Dear Member:

The Bylaws of Lee County Electric Cooperative allow name changes under specified conditions including marriage, divorce, and other legal name changes. Please complete a Membership Status Change Affidavit, sign it in the presence of a notary, and return it with the appropriate documentation listed below.

- Name Change for Marriage - Please return with a copy of your marriage license.
- Name Change for Divorce - Please return with a copy of your final judgment.
- Legal Name Change - Please return with a copy of the Court document.
- **Add** a Joint Name - Bylaws permit addition of a spouse or Joint Tenancy *only* – *For Joint Tenancy please return with a copy of the deed to the property.*
- **Delete** Joint Name - Please complete a Membership Status Change Affidavit.
- Name Change for a Business - Please return with proof of ownership, which may consist of:
 - a. Income tax return
 - b. State license
 - c. Articles of Incorporation (Subchapter ‘S’ or otherwise)
 - d. Purchase agreement or bill of sale
 - e. Copy of Request for Fictitious Name Change

Please mail all paperwork to:

Attn: Customer Care Center
LCEC
P.O. Box 3455
North Fort Myers, FL 33918-3455

If you have any questions, please contact the Customer Care Center:

Phone: 239-656-2300
Toll-free: 800-599-2356
Fax: 239-995-4287
Web site: www.lcec.net
Email: customercare@lcec.net

Thank you for your cooperation.

Sincerely,

LEE COUNTY ELECTRIC COOPERATIVE, INC.



Experian # _____
CSR Initials _____
Date _____

MEMBERSHIP STATUS CHANGE AFFIDAVIT

State of _____ County of _____

Before me this day personally appeared _____ who being duly sworn states that:
I have the following Membership (Service Credit Membership) with LCEC, Inc., ID # _____

Social Security (or EIN) # _____ Name _____

The Bylaws of LCEC allow name changes under specific conditions—marriage, divorce, and other legal name changes or joint tenancies and similar ownership structures.

I request that the title on this Membership be changed to _____ effective _____.

I understand that this change will not release me/us of liability of any unpaid amounts owed on any accounts associated with the above Membership.

Initial one box (if applicable):

By **adding** the Co-Applicant named below, I understand that all past and future equity ownership will become jointly owned, effective _____.

By **removing** the Co-Applicant named below, I understand that this change will not release liability of any unpaid amounts owed on any accounts associated with the above membership effective _____.

Applicant Social Security #

Applicant Signature

Co-Applicant Information

Co-Applicant Name _____ Social Security # _____

Date of Birth _____ Phone # _____

Previous Address _____

My notarized signature below authorizes LCEC to complete an Identity and Credit Verification. Should the credit bureau results require that a deposit is necessary, a deposit will be added to all services associated with the membership above.

Co-Applicant Signature

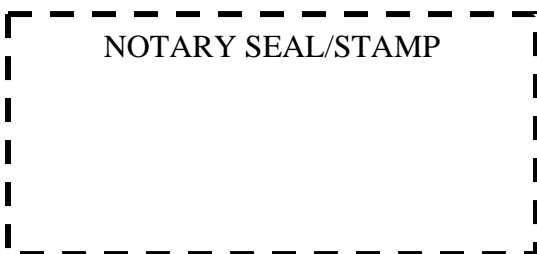
Signed and sworn to (or affirmed) before me on _____ by _____
He/she is personally known to me or has produced _____ as identification.

Notary Signature & Commission #

Printed Name of Notary _____ Date _____

Completed By _____ Date _____

LCEC OFFICE USE ONLY



Equity Dept. Use	EQ SCM # _____
	EO Balance \$ _____
	Due \$ _____
	Equity Rep _____
	Processed _____