



Name Change Form

Old Owner Name: _____ (Please print)

New Owner Name: _____ (Please print)

Owner Number: _____

Last 4 of Taxpayer ID / Social Security Number: _____

Current Address: _____

Check here if this is a new address and you would like Blackbeard to update our records

Old Address:

(if applicable) _____

Contact Information:

Home: _____ Fax: _____ Cell: _____

Email: _____

Type of document attached:

Marriage License

Divorce Decree

Other (please specify) _____

SIGNATURE: _____ **DATE:** _____

Please provide any special instructions: _____

Blackbeard Operating, LLC
Attn: Division Order Department
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Fort Worth, Texas 76107
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