

TAHLEQUAH PUBLIC WORKS AUTHORITY & NORTHEAST OKLAHOMA  
PUBLIC FACILITIES AUTHORITY

NAME CHANGE

ACCOUNT#: \_\_\_\_\_

OLD NAME: \_\_\_\_\_

NEW NAME: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

ADDRESS CHANGE

Account#: \_\_\_\_\_

OLD NAME: \_\_\_\_\_

NEW NAME: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

TRANSFER OF DEPOSITS

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

Account Number: \_\_\_\_\_

\_\_\_\_\_  
(Name) \_\_\_\_\_ has my permission to take down my  
deposits and put them in her/her name.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature