



REQUEST FOR CHANGE TO COMPANY NAME / ADDRESS

The undersigned submits the following information in support of a name change and/or address change. The undersigned requests that Autodesk change all of its records indicated below to reflect the changes on this form. This form is **not** to be used for the transfer of licenses to any third party, or outside the original territory of purchase.

Please fill out Sections **A, B, C and D.**

A. SELECT THE APPROPRIATE BOX(S) BELOW:

Name Change

Address Change

Name Correction

B. UPDATED INFORMATION

Former Company Information:	New Company Information:
Customer Specific Number (CSN) <i>(if available)</i>	
Company Name (English)	Company Name (English)
Company Name (Native Language)	Company Name (Native Language)
Street Address	Street Address
City/State/Postal Code Country	City/State/Postal Code Country
Contact Person	Contact Person
Phone Email	Phone Email
Company Registration / ABN / ACN / NZBN / VAT # <i>(as applicable)</i>	Company Registration / ABN / ACN / NZBN / VAT # <i>(as applicable)</i>

C. PRODUCT INFORMATION

If the CSN is not available (in Section B above), please provide us with the following product information for products that need to be listed under the New Company Name and/or New Company Address *(please type or print legibly)*.

Product Name	Version	Serial Number	Number of Seats	Subscription Contract Number <i>(if applicable)</i>

Note: Please attach another list for Product Information if you have more items.

D. SIGNATORY BELOW CERTIFIES AS FOLLOWS:

The undersigned submits this request form ("Request") on the basis of updating the registration information only, and warrants that such Request has not been submitted on the basis of a transfer of Autodesk Product licenses to any third party, or outside the original territory of purchase. The undersigned acknowledges that in the event that information supporting this Request is subsequently discovered to have been intentionally false or misleading, Autodesk reserves the right to terminate any/ all affected related contracts, licenses or other entitlements. Where the undersigned is signing on behalf of a company, the undersigned represents, acknowledges and warrants that they are authorized to execute this Request Form on behalf of that company and to bind that company to the representations, warranties and acknowledgements contained herein.

Name	
Title/Position	
Date	
Signature	