



## ACCOUNT ADDRESS UPDATE

Use this form to add, update/change, or remove your account billing or shipping address.

### Instructions

For all options, complete SECTION 1 and select the appropriate checkbox below.

- ☐ *Add New Address* Complete Sections 2 and 4  
☐ *Update/Change Existing Address* Complete Sections 2 and 4  
☐ *Remove Address* Complete Sections 3 and 4

#### SECTION 1 CURRENT ADDRESS

ALL INFORMATION BELOW IS REQUIRED

SELECT ADDRESS TYPE ☐ BILLING ☐ SHIPPING

Business Name \_\_\_\_\_ Acct No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

#### Section 2 NEW or UPDATED/CHANGED ADDRESS

ALL INFORMATION BELOW IS REQUIRED

SELECT ADDRESS TYPE ☐ BILLING ☐ SHIPPING

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

#### Section 3 REMOVE ADDRESS

CHECKBOX SELECTION IS REQUIRED

SELECT ADDRESS TYPE ☐ BILLING ☐ SHIPPING

The address shown in SECTION 1 is no longer active for my account and there is no replacement. Our account has another address(es) on record with HollisterStier Allergy.

#### Section 4 CONTACT AND LICENSEE

ALL INFORMATION IS REQUIRED

Contact Name \_\_\_\_\_ Office Hours \_\_\_\_\_  
Contact Email Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Licensee Name \_\_\_\_\_ License No. \_\_\_\_\_  
License Expiration \_\_\_\_\_ State Issued \_\_\_\_\_ NPI No. \_\_\_\_\_  
Licensee Signature \_\_\_\_\_

### Return completed form

Fax 800-752-6258 ■ Email [customerservice@jhs.jubl.com](mailto:customerservice@jhs.jubl.com).