



INFORMATION SERVICES BRANCH

EMPLOYER PULL NOTICE CHANGE OF ACCOUNT INFORMATION

SUBMIT WITHIN 10 DAYS OF CHANGE

SECTION A — CURRENT INFORMATION ON FILE

COMPANY NAME		REQUESTER CODE NUMBER
DBA		TELEPHONE NUMBER ()
MAILING ADDRESS		
CONTACT PERSON	ATTENTION (MAIL TO)	
EMAIL ADDRESS		

SECTION B — REQUESTED CHANGES TO THE EMPLOYER PULL NOTICE ACCOUNT

IF YOUR BUSINESS IS UNDER NEW OWNERSHIP, A NEW APPLICATION IS REQUIRED. CALL FOR ADDITIONAL INFORMATION.

EMAIL ADDRESS		
MAILING ADDRESS		TELEPHONE NUMBER ()
CONTACT PERSON	ATTENTION (MAIL TO)	

I understand that this information is provided for the lawful conduct of this business and the pursuit of its interest and that any misuse will result in both cancellation of the requester number and refusal of subsequent application for requester number.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

AUTHORIZED PERSON'S SIGNATURE

X

Return completed form to: **DEPARTMENT OF MOTOR VEHICLES**
Employer Pull Notice Unit
P. O. Box 944231
Mail Station H-265
Sacramento, CA 94244-2310
(916) 657-6346

“Upon request, this document can be produced in Braille or large print.”