

Address Change Request

Owner Name	Owner Number
SSN or Taxpayer Identification Number	
Signature	Date
Old Address:	New Address:
(If you have had multiple previous addresses, please l	ist all on a separate piece of paper or on the back.)
Current Phone Number	Email Address

Mail, Email, of Fax to:

NGL Crude Logistics, LLC Attn: Division Order Department 6120 S. Yale, Ste. 805 Tulsa, OK 74136 DO@nglep.com 855-829-3720 (fax)