



Local 513 - Fringe Benefit Funds  
International Union of Operating Engineers, AFL-CIO

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## ADDRESS VERIFICATION/CHANGE FORM

Reason for the address change form:

- Members Request
- We do not have a current address in our system
- We are holding returned mail that may include important information in regard to benefits that may be payable to the member.

In order to verify the validity of a change of address, the following must be completed and returned to the Fund Office. **We cannot update your record with the new information until proper authorization is received.** Failure to fully complete this form and return it to the Benefits Office will result in all Benefits and Correspondence pertaining to the Welfare, Pension, Annuity and Vacation Funds being placed in **Pend** status until proper authorization is received.

Full Name: \_\_\_\_\_

New Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone #: \_\_\_\_\_ Cell phone #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security or Ben ID #: \_\_\_\_\_

Reason for change of address:      Relocated for work      Married      Divorced

Legal Separation      Purchased new home      Other

Explain "other": \_\_\_\_\_

Member Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Effective Date of Address Change: \_\_\_\_\_

**REMEMBER TO CHANGE YOUR ADDRESS WITH  
THE UNION - LOCAL 513**