



# Telecommunications Billing Account Change

Email completed work order to [tamu-it-billing@tamu.edu](mailto:tamu-it-billing@tamu.edu). If you do not receive confirmation within 48 business hours, please call 979.845.8300. Changes will be effective within 30 days from the date the work order is received.

**For non-Part 02 account numbers:** If you need to change only the name of an account already set up in FAMIS, complete the form at <https://u.tamu.edu/accountchange>, noting **Name Change Only**, and fax to 979.458.4188.

## Requestor Information

Name: \_\_\_\_\_ Unit/College/Department: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Old Billing Information

Old Account No. (xx-xxxxxx-xxxxx): \_\_\_\_\_

## New Billing Information

Billing Contact Name: \_\_\_\_\_

Billing Contact Email Address: \_\_\_\_\_ Billing Contact Phone Number: \_\_\_\_\_

System Part Code: \_\_\_\_\_ Department Code: \_\_\_\_\_ Account Name: \_\_\_\_\_ Mailstop: \_\_\_\_\_

New Account No. (xx-xxxxxx-xxxxx): \_\_\_\_\_

Account Signature Authority Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Item	Service Number	Building / Room
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____

## Specific Numbers to Move

*If only specific numbers are to be moved, please provide detailed descriptions.*

Notes: \_\_\_\_\_



**Division of IT Only**

Date Completed: \_\_\_\_\_ Completed by: \_\_\_\_\_

Additional Remarks: \_\_\_\_\_