

AMERICAN PETROLEUM INSTITUTE Monogram Program™/ APIQR™





200 Massachusetts Avenue NW Suite 1100 Washington, DC 20001-5571 USA Phone 877-562-5187 (Toll-free U.S. and Canada) (+1) 202-682-8041

(+1) 202-682-8041 (Local and International) Email certification@api.org www.api.org/certification

Facility Name / Location CHANGE REQUEST FORM

For name change requests to Monogram/APIQR certificates or location changes for your facility/organization, fill out this form with the **NEW** information and email to Certification@api.org. Include the documentation listed here:

- API Monogram Licensing Program Requirements (if you have a Monogram License)
- APIQR Registration Program Requirements (if you have an APIQR Registration)
- · An official document in the English language that reflects the legal name of your organization/company (Name change requests only)

Check All that Apply:	
Facility/Organization Name Change	Effective Date:
Facility/Organization Location Change	Effective Date:
Facility/Organization Ownership Change	Effective Date:
	ity Name: ————————————————————————————————————
Actual Physical Location of Facility to be Lic certificate)	rensed and/or Registered: (For location change requests, provide the NEW location to be identified on your
Street Address (PO Box not acceptable)	
City	State/Province
Postal Code Country	
Primary Contact for Correspondence/Billing:	:
Name	Title/Position
Email	Phone
Street Address (PO Box not acceptable)	
City	State/Province
Postal Code Country	
Facility Contact (Person at the licensed facility loca	ation, if different from the Primary Contact above)
Name	Title/Position
Email	Phone
Name Change Requests:	
What is the reason for the name change?	
Location Change Requests	
Number of employees transferring to the new fac	cility: Distance from original location:
Will the same Quality Management System be use	ed at the new facility? Yes No