



WEST VIRGINIA BOARD OF VETERINARY MEDICINE

**5509 Big Tyler Road, Suite 3
Cross Lanes, West Virginia 25313
Telephone: (304) 776-8032 Fax: (304) 957-0404**

NAME AND/OR ADDRESS CHANGE – NO FEE

You are required to provide the board with current contact info:

- Name changes (send a certified copy or original of Marriage License; Divorce Decree, etc.).
 - No photo copies
 - Documents will not be returned
- Home/work address change, including county, and telephone number.

Please print or type all information

Date of Change:	License /Registration/Certification Number:
Name:	Prior Name (if applicable)
Home Street Address:	
City:	State:
Zip:	County:
Phone #:	Email Address:

Preferred address – The records of this Board are considered public record. If you do not wish to disclose your home address or phone number, please provide a different address where you can reliably receive mail pertaining to your license/registration.

☐ Yes, it is ok to use my home address ☐ No, use the address and phone number listed below

Facility Mailing Address

Facility Name:	
Street Address:	
City:	State:
Zip:	County:
Phone#	Fax#
Email Address:	

Signature: _____

Date: _____