



## Assurance Wireless Change of Address Form

This form is to be used to officially change your Home Address or Mailing Address. If you are moving to a new State, you will have to reapply for Lifeline service in the new State. We will mail you an application for the new State.

### Address Information

Full Name: \_\_\_\_\_  
*Last First M.I.*

Home Address: \_\_\_\_\_  
*Street Address – PO Boxes Cannot be Accepted Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

**Assurance Wireless Number:** ( ) \_\_\_\_\_ **Home Phone Number:** ( ) \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
*Street Address or PO Box Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

You have two options to return this form to us:

- **Fax this form to 1-877-732-3018**

OR

- **Mail this form to Assurance Wireless, PO Box 686, Parsippany, NJ 07054**

We thank you for being our customer.

If you have any questions about your Assurance Wireless service, please call us at 1-888-321-5880.