Ohio Industrial Commission

REPRESENTATIVE OR EMPLOYER CHANGE OF ADDRESS/CONTACT

Check one of the This is a change of	e options below. f contact information for a	3 :	
☐ Representative	Rep ID #		
☐ Employer	Risk #		
Current Contact Information on File with the Industrial Commission			
Name		Company/Firm Name	
Address			
City, State, Zip, Coun	try		
Telephone	Fax	Email	
	New (Contact Information to be Changed	
Name		Company/Firm Name	
Address			
City, State, Zip, Coun	try		
Telephone	Fax	Email	
	(mm/dd/y	wing individual with the understanding that the new address will rom the Ohio Industrial Commission.	
Print Name		Date	
Signature			
Fax the completed form to the Ohio Industrial Commission at (614) 728-7004. If you have questions contact the IC Helpdesk at (614) 644-6595.			
Address Changed E		INDUSTRIAL COMMISSION USE ONLY Date	
Address Changed E	Jy	Date	