



# CEBU II ELECTRIC COOPERATIVE, INC.

MALINGIN, BOGO CITY, CEBU

"WE SERVE POWER FOR PROGRESS"

Tel.#: (032)434-8151, (032)434-8555

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Websites: [www.facebook.com/cebecoll](http://www.facebook.com/cebecoll)

[www.cebeco2.com.ph](http://www.cebeco2.com.ph)

[cebeco2@yahoo.com](mailto:cebeco2@yahoo.com)

## CHANGE OF NAME FORM

1. CURRENT REGISTERED ACCOUNT NAME (with attached recent receipt):

\_\_\_\_\_  
(Family Name)

\_\_\_\_\_  
(First Name/Spouse Name)

\_\_\_\_\_  
(Middle Name)

REGISTERED ACCOUNT NO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TYPE OF CONNECTION: \_\_\_\_\_

2. NAME OF THE APPLICANT FOR CHANGE OF NAME:

Contact No: \_\_\_\_\_

\_\_\_\_\_  
(Family Name)

\_\_\_\_\_  
(First Name/Spouse Name)

\_\_\_\_\_  
(Middle Name)

ADDRESS: \_\_\_\_\_

REASON/S FOR CHANGE OF NAME:

a. DECEASED MEMBER-OWNER

d. CHANGE in TENANCY

b. PURCHASE OF PROPERTY

e. Typing Error (present one Valid ID only)

c. LEGAL HEIR

f. Others \_\_\_\_\_

### DOCUMENTARY REQUIREMENTS

#### A. PROOF OF OWNERSHIP

REMARKS/DATE

a. Photocopy of "TRANSFER CERTIFICATE OF TITLE"

or "DEED OF ABSOLUTE SALE"

\_\_\_\_\_/\_\_\_\_\_

b. Photocopy of "DECLARATION OF REAL PROPERTY"

\_\_\_\_\_/\_\_\_\_\_

c. Photocopy of "Testament of Will"

\_\_\_\_\_/\_\_\_\_\_

d. Photocopy of Waiver from Sibling/s or Owner (Agreement of Both Parties)

\_\_\_\_\_/\_\_\_\_\_

e. Photocopy of "NO OBJECTION CERTIFICATE" or

"KASABUTAN SA PAGTUGOT" from the other Legal Sibling/s or Owner

(Mandatory if no Legal Docs presented and must be notarized)

\_\_\_\_\_/\_\_\_\_\_

f. Photocopy of "CONTRACT OF LEASE" (with Letter/Affidavit of Undertaking)

\_\_\_\_\_/\_\_\_\_\_

g. Photocopy of "DEATH CERTIFICATE" (for deceased parents/member-owner)

\_\_\_\_\_/\_\_\_\_\_

h. Photocopy of "DEED OF DONATION" (for donated lot or property)

\_\_\_\_\_/\_\_\_\_\_

#### B. OTHER REQUIREMENTS

a. Must attend the Pre-Membership Seminar for New Member/s

\_\_\_\_\_/\_\_\_\_\_

b. Filled up Application for Service Connection by the Applicant

\_\_\_\_\_/\_\_\_\_\_

c. Photocopy of Marriage Certificate if Married Applicant

\_\_\_\_\_/\_\_\_\_\_

d. 2x2 ID Picture – 1pc each for Husband and Wife

\_\_\_\_\_/\_\_\_\_\_

e. Printed Photo of the House and Service Entrance

\_\_\_\_\_/\_\_\_\_\_

f. Photocopy of one (1) Valid ID of the applicant/s

\_\_\_\_\_/\_\_\_\_\_

FILED BY (APPLICANT):

EVALUATED BY:

\_\_\_\_\_  
SIGNATURE OVER PRINTED NAME/Date

\_\_\_\_\_  
CWD Clerk/Date

NOTED BY:

APPROVED BY:

\_\_\_\_\_  
MCS Supervisor/Date

\_\_\_\_\_  
OIC, ISD Manager/Date

**CEBECO II**

INSTITUTIONAL SERVICES DEPARTMENT