



## CHANGE OF ADDRESS FORM

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
(only the last four are required)

Participant Name: \_\_\_\_\_  
First Middle Initial Last

New Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

In which trust funds do you participate?

- Southern California Pipe Trades Trust Funds  
 Inland Refrigeration & Air Conditioning Trust Funds  
 Landscape, Irrigation and Lawn Sprinkler Industry Trust Funds

Are you a Southern California Pipe Trades pensioner or surviving spouse?

- Yes  No

I understand that this Change of Address Form may update the records of all trust funds administered by the Southern California Pipe Trades Administrative Corporation, including the Southern California Pipe Trades trust funds, the Inland Refrigeration & Air Conditioning trust funds, and the Landscape, Irrigation and Lawn Sprinkler Industry trust funds. I understand that because some mailings, such as pension checks, are processed well in advance of the postmark date, I should submit this form at least two weeks before the address change is effective.

X \_\_\_\_\_  
Participant Signature Date

**MUST BE SIGNED and DATED**