

# Dealer and Repair Facility Account Manager Change Request

Business name: \_\_\_\_\_ License number: \_\_\_\_\_

Business address: \_\_\_\_\_

The designated Account Manager is the only person with full account access who is able to manage other users on the account.

**This form is to change only the Account Manager and must be signed by an existing Account Manager or a listed Owner.**

1. To change the Account Manager, please fill in the following:

a. Account Manager to be removed:

Name: \_\_\_\_\_ User ID: \_\_\_\_\_

b. Account Manager to be added:

Name: \_\_\_\_\_ User ID: \_\_\_\_\_

**IMPORTANT:** If the new Account Manager is not already a user on this account, that person will need to use e-Services to request an access code for the account and use that code to add access to the account. Note: The access code will be emailed to the contact of record on the account, or it can be mailed via USPS First Class Mail.

2. Please update our primary business contact email address to the following:

\_\_\_\_\_

A listed **Owner** or the existing **Account Manager** must sign this request.

I hereby certify that I have the authority to request account user access changes on behalf of the business.

Signature: \_\_\_\_\_ Printed name: \_\_\_\_\_

Email completed form to the Business Licensing Section: [Licensing@Michigan.gov](mailto:Licensing@Michigan.gov)