

## KENTUCKY BOARD OF VETERINARY EXAMINERS

4047 Iron Works Parkway, Suite 104, Lexington, KY 40511

Office: 502-564-5433 • Fax: 502-753-1458

kbve.ky.gov • vet@ky.gov

Request for Name or Address Change								OFFICIAL USE ONLY		
<b>Instructions:</b> If unable to make personal information updates online through the eServices Portal, this form shall be completed by a licensee or certificate holder of the Kentucky Board of Veterinary Examiners to update an individual's legal name or address. The eServices Portal can be accessed at <a href="kbve.ky.gov">kbve.ky.gov</a> , scroll down and click the icon next to the "Online Services" heading to be taken to the portal login page.										
I. Requestor Information										
Registered First Name		Registered Middle Name Registered Last N					t Name	ame		
KY License Number Expir		tion Date   Social Security Number   Date				Date of	e of Birth, format: MM/DD/YYYY			
	Î									
Current Email Address										
Current Cell Phone		Current Business Phone								
II. Address Change Information, if any										
Address Type	Street City					S	T 2	Zip	Country	
NEW Personal										
Mailing Address										
NEW										
Business Name				1					1	
NEW Business Address										
Dusiness Address										
III. Name Change Information, if any										
NEW First Name	NEW Middle Name NEW Last Name					ne				
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IV. Required Attachments										
☐ For <u>personal address change</u> , include a copy of updated driver's license or passport showing new address. ☐ For <u>name change</u> , include copy of updated driver's license, social security card, passport, or marriage certificate.										
1 of <u>name change</u> , include copy of updated driver's needse, social security card, passport, of marriage certificate.										
Signature of Requestor							Date			

Submit Complete Form to: Vet@ky.gov or via post to Kentucky Board of Veterinary Examiners 4047 Iron Works Parkway, Suite 104
Lexington, Kentucky 40511

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Form Last Updated: 10/2024