



For UESP Use Only
UESP Account _____
Date Received by UESP _____
User Initials _____

Form 740

Entity Limited Power of Attorney Master Administrator Change

ABOUT THIS FORM

- Use this form to change the individual listed as the master administrator who will act on behalf of the entity for an entity limited power of attorney.

NEXT STEPS

- To change the master administrator, provide information about the newly listed individual.
- The new master administrator must provide information and sign this form.
- Upon successful processing of this form, UESP will send both the current and new master administrator a registration confirmation email.

SUBMITTING THIS FORM

- Please print clearly – preferably in capital letters, using black or blue ink. To ask questions about completing this form, contact UESP toll-free at 888.529.1886 on business days from 8:00 a.m. to 5:00 p.m., Mountain Time.
- Return this form to: UESP, PO Box 145100, Salt Lake City, UT 84114-5100. For delivery by overnight carrier, send to: UESP, Board of Regents Building, Gateway 2, 60 South 400 West, Salt Lake City, UT 84101-1284. You may also fax this form to 888.529.9197.

1 Entity Information (Required)

Entity Name _____

POA Number _____

2 Current Master Administrator Information (Required)

Name of Current Master Administrator (Last, First) _____

Title _____

Email Address _____

3 New Master Administrator Information (Required)

Is the new master administrator already an existing administrator or associate for the entity? (if yes, existing log in credentials may be used) Yes No

Name of New Master Administrator (Last, First) _____

Title _____

Mailing Address _____

Physical Address (if different from mailing address) _____

City/State/Zip _____

City/State/Zip _____

Phone Number _____

Fax Number _____

Email Address _____

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4a Current Master Administrator Signature Authorization (Required)

By signing below,

- I certify that I will be removed from the role of UESP master administrator for the entity listed in Section 1.
- I understand that certain functions and online features available only to the master administrator will no longer be available to me.
- I certify that the individual named in Section 3 is authorized to become the master administrator.
- I understand that the new master administrator named in Section 3 may grant me a new access level.



Signature of Current Master Administrator

Date (mm/dd/yyyy)

Current Master Administrator (please print)

Title

4b Principal of Entity Signature Authorization (Required if the outgoing master administrator is unable to complete)

If the outgoing master administrator is unable to sign and authorize the change (i.e., he or she is no longer an agent of the entity), a principal of the entity may complete this portion of the form to provide signature authorization on behalf of the current master administrator.

By signing below,

- I certify that the current master administrator is unable to sign and authorize this change.
- I understand that the current master administrator will be removed from the role of UESP master administrator for the entity listed in Section 1.
- I understand that certain functions and online features available only to the master administrator will no longer be available to the current master administrator.
- I certify that the individual named in Section 3 is authorized to become the master administrator.
- I understand that the new master administrator named in Section 3 may grant me a new access level.
- I certify that I have the authority to act on behalf of the named entity and to remove the current master administrator from the role of UESP master administrator.



Signature of Principal of Entity

Date (mm/dd/yyyy)

Principal of Entity (please print)

Title

5 New Master Administrator Signature Authorization (Required)

By signing below,

- I certify and agree to maintain the registration for the named entity that may be granted limited power of attorney authority for designated UESP accounts as specified in the Entity Limited Power of Attorney Authorization form(s) (form 710).
- I certify that I have the power and authority to sign this form on behalf of named entity.
- I understand that this form does not impose a duty on the named entity to exercise any granted limited power of attorney authority; however, when the entity exercises such authority, the entity will be responsible for any resulting consequences of such actions, must use due care to act for the account owner/agent's benefit in accordance with the limited power of attorney authorization, and will be responsible for maintaining records relating to such actions.
- I understand that the signature provided below will be used to validate certain transactions.
- I understand I may grant a new access level to the person named in Section 2.



Signature of New Master Administrator

Date (mm/dd/yyyy)

New Master Administrator (please print)

Title