

**CHANGE OF HOME / BUSINESS ADDRESS**  
**(In-House Counsel)**

*\*\* For attorneys admitted to practice pursuant to Rule 1:27-2\*\**

APPLICANT ID NUMBER: IHC: \_\_\_\_\_

Name: \_\_\_\_\_

Effective Date of Change: \_\_\_\_\_

Old Business: \_\_\_\_\_

Company Name

Address

City

County

State

Zip Code

New Business: \_\_\_\_\_

Company Name

Address

City

County

State

Zip Code

New Phone Number: \_\_\_\_\_

New E-mail Address: \_\_\_\_\_

(confirmation will be provided via e-mail)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Complete and send to:**

**Fax:** (609) 815-2913

**Regular USPS Mail**

Secretary, Board of Bar Examiners

ATTN: In-House Counsel

PO Box 973

Trenton, NJ 08625-0973

**Commercial Carrier Deliveries**

Secretary, Board of Bar Examiners

ATTN: In-House Counsel

Hughes Justice Complex, 8<sup>th</sup> Floor, North Wing

25 Market Street

Trenton, NJ 08625