

UPDATE COMPANY INFORMATION FORM

Company Name:

Please check all updates that apply:

Mailing Address - Update: Address, City, State, Zip (No P.O. Box)

Physical Address - Update: Address, City, State, Zip (No P.O. Box)

Company Information - Update: Phone, Fax, Email

Company Contact - Update: Contact Person, Title, Phone

Mailing Address

City:

State:

Zip:

Physical Address

City:

State:

Zip:

Company Information

Customer Phone:

Office Phone:

Fax #:

Email:

Company Contact

Name:

Title:

Direct Phone:

By submitting this form you certify that the information submitted is true and correct.

This form must be submitted by an authorized representative from the company.

Representative:

Title:

Date:

Please click [here](#) to print out the completed form and fax to SJC Ground Transportation at **(408) 392-1144**

OR email to: airportgt@sjc.org.