

**Authentication Form - Billing Account Owner**

Company Name	
Name of the person requesting access to change the email address in Chargebee	
Email of the person requesting the change	
Former email address	
Settings ID	
Purchase contract number	
Company VAT ID	
if available: Chargebee Subscription number	
if applicable: statutory declaration	

I hereby confirm that I am authorized to request access to the Admin Interface concerning the above-mentioned company.

\_\_\_\_\_  
Place, Date, Signatur contact partner

\_\_\_\_\_  
Company stamp