

Name/Address Change Form
S.C. Public Employee Benefit Authority
202 Arbor Lake Drive
Columbia, SC 29223

Type of change(s) requested:

Address

Print or type in black ink.
Please read the instructions on Page 2 before completing this form.

Retirement: Active/
Inactive Retiree/
Payee

Insurance: Retired
PEBA Insurance
Benefits Group No.: _____
Group name: _____
Effective date of change: _____

Name: _____
First MI Last Suffix

Social Security #: _____ Benefits Identification #: _____

Section II NAME CHANGE

(Please refer to the instructions to determine what documentation is required.)

Other _____

Previous name _____
First MI Last Suffix

Address changes can also be entered online through *MyBenefits* and *Member Access* at www.peba.sc.gov.

USE THIS ADDRESS FOR: INSURANCE RETIREMENT BOTH INSURANCE AND RETIREMENT

Previous address: _____

New address: _____
Street Apt. City State Zip Code

Email _____

USE THIS ADDRESS FOR: INSURANCE RETIREMENT
_____ County Code
Street Apt. City State Zip Code

Section IV SIGNATURE

Signature Date

Instructions for completing the Name/Address Change form

This form will enable you to make changes to your name or address in the records of the S.C. Public Employee Benefit Authority (PEBA).

Please note: Retirement address changes can be made through Member Access. Insurance address changes can be made through MyBenefits. You will find links to both on PEBA's website, www.peba.sc.gov.