



MERCHANT ACCOUNT CHANGE REQUEST FORM

CURRENT INFORMATION

DATE: _____

MID: _____

DBA NAME: _____

LEGAL NAME: _____

DBA ADDRESS: _____

CHANGE(S) REQUESTED (Please check all applicable)

DBA Name: _____
**Provide legal document with new Information

DBA Address: _____
**Provide Copy of Utility Bill with new Information

DBA Phone Number: _____ - _____ - _____

DBA Fax Number: _____ - _____ - _____

Mailing Address: _____

Email Address: _____

Web Address: _____
(if applicable)

Changes that are requested must be signed by the person who signed the original merchant application. (Owner of the merchant account)

Print Name: _____

Signature: _____