



Date:	
Merchant Number*:	
Merchant DBA*:	
Merchant (Requestor's Name)*:	
Federal Tax ID*:	
Last 4 Digits of Signers Social Security Number*:	
Merchant Phone Number*:	

ABA/DDA Change Request

<input checked="" type="checkbox"/>	What Type of Account
<input type="checkbox"/>	Deposits
<input type="checkbox"/>	Fees
<input type="checkbox"/>	ACH Only

Bank Name:	
Bank Phone Number:	

	Old Values	New Values
ABA / Routing Number*:		
DDA / Account Number*:		

<input checked="" type="checkbox"/>	<u>ATTENTION - The Following is REQUIRED to Complete the Bank Change:</u>
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	<p>A voided check from the new bank account with DBA/Legal name & address printed on check.* <u>OR</u> An official bank letter that includes: bank letterhead with bank rep signature and contact information, the date, merchants DBA and new ABA/DDA numbers.</p>
	Please check if the merchant is processing using a third party gateway.*
	Please check if the merchant has a PROFIT STARS account.*

Merchant/Agent must submit ALL required documents. Failure to do so will result in a delay of this update. Once Bank Change is submitted, the bank change will take effect in one business day. If the original application was signed digitally, please submit a copy of your Driver's License or an equivalent government issued form of identification.

*

Merchants Signature

Date

* _____
Merchants Printed Name

* _____
Merchants Title

Please note - Only the application signer or authorized contact is permitted to submit bank change requests. Forms submitted by another party will be rejected via a ticket to the agent. **If a merchant is using AMEX ESA they need to reach out to AMEX directly to finish their bank change.**

* *Indicates a required field*