



Toll-Free : 800-546-1997
Fax : 877-734-6506
Email : support@merchantplus.com

BANK ACCOUNT FOR ACH DEBITS/CREDITS CHANGE REQUEST FORM

IMPORTANT - PLEASE READ BEFORE PROCEEDING:

ALL INFORMATION LISTED IS REQUIRED AND MUST BE COMPLETED.

PLEASE FAX THIS REQUEST FORM AND A VOIDED CHECK TO DATA PROCESSING AT (877) 734-6506.

THIS REQUEST WILL NOT BE EFFECTIVE UNTIL THE REQUIRED DOCUMENTS ARE PROVIDED AND APPROVED.

Thank you for your cooperation.

Merchant Name: _____ **Merchant Number:** _____

IMPORTANT: If the merchant name on the check is different than the current name on the merchant account, the request will not be processed without a completed Business Name Change form. Please contact Merchant Services at (877) 734-6506 or via email to support@merchantplus.com for a copy of this form.

>> Old Banking Information:

Bank Name: _____

Bank Phone Number: _____

Transit Routing Number / ABA Number: _____

Account Number: _____

>> New Banking Information: (Must be a checking account)

Bank Name: _____

Bank Phone Number: _____

Transit Routing Number / ABA Number: _____

Account Number: _____

Signature of Authorized Principal: _____ Date: _____
(as specified on the Merchant Application/Agreement)

Print Name: _____ Phone: _____ Email Address: _____

MerchantPlus LLC - 29 Broadway, 30th Floor, New York, NY 10006

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