

MODIFICATION OF MERCHANT SETTLEMENT INFORMATION

AUTHORIZATION FORM

Instructions:

1. The person signing this form must also be the person who signed the Service Agreement.
2. Please attach a void check from your new account or a bank letter confirming the routing and account number.
3. Submit the completed form and the void check to our ACH Department:

Fax: 866-607-4868

Email: ach@merchant-support.com

Personal Information

Name of Owner/Principal: _____
(Please print name)

Company Name: _____

Address: _____

Date: _____ / _____ / _____ (mm / dd / yyyy)

Merchant email (required to confirm changes): _____

Merchant ID: _____

Banking Information

Please note that the account must be drawn on a checking account. If you have an Amex account please call Amex directly to update.

Account Holder Name: _____

For Canadian Merchants
select:

Routing/ABA Number: _____

Account Number: _____

Credit Card Settlement ☐

Bank Name: _____

Debit/Interac Settlement ☐

Account Type: _____

I hereby authorize all credits and debits related to the above referenced merchant ID, in accordance with the Service Agreement, to post by ACH to the bank account listed above and corresponding to the attached void check or bank letter.

Signature of Owner/Principal: _____