

Account Maintenance Form

AN INCOMPLETE FORM WILL CAUSE A DELAY IN PROCESSING TIME

Upon Completion Fax to **1-866-954-7587** or Email to **amf@electronicpayments.com**

Date

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Merchant ID Number (MID)

change. Utility Bill, I			on you would like to c	hange on your	account.
		nse, Lease Agree			
Update my I	mailing addres		ement, Fictitious Name Filing, or	Sellers Permit.	
		s only.	Update both my physical and mailing addresses.		
				New DBA/Physical Phone Number	
			New State	New Zip Code	
		New Legal Name (a	as it appears on your Federal Tax Retur		This is an E
C Corporation	S Corporation		Partnership	Trust/Estate	LLC
N	ew/Additional Co	ontact Name		New Phone Number	
Si	gnature		Date	Date	
ents (FOR IN	ITERNAL	. USE ONL	Y)		
`			Date		
Si	gnature		Date		
	C Corporation Si Pents (FOR IN	C Corporation S Co	New Legal Name (sontact Merchant Support to obtain the necessary document	Schange. Art. Of Incorporation, Tax documents, IRS SS-4 or CP575 letter, Tax return New Legal Name (as it appears on your Federal Tax Return contact Merchant Support to obtain the necessary documents. Effective Date MUST CHECK ONE: C Corporation S Corporation Partnership New/Additional Contact Name Signature Signature Signature	New State New Zip Code Schange. Art. Of Incorporation, Tax documents, IRS SS-4 or CP575 letter, Tax returns. New Legal Name (as it appears on your Federal Tax Return) contact Merchant Support to obtain the necessary documents. Effective Date MUST CHECK ONE: This is a SSN C Corporation S Corporation Partnership Trust/Estate New/Additional Contact Name New Phone Number Signature Date Date