

Merchant Services

ACH Debits / Credits Bank Account Change Request Form

IMPORTANT – PLEASE READ BEFORE PROCEEDING. ALL INFORMATION LISTED IS **REQUIRED** AND MUST BE COMPLETED. PLEASE FAX THIS REQUEST FORM WITH A **PRE-PRINTED VOIDED CHECK OR BANK LETTER** TO DATA PROCESSING AT (248) 305-1005. THIS REQUEST WILL NOT BE EFFECTIVE UNTIL THE REQUIRED DOCUMENTS ARE PROVIDED AND APPROVED. PLEASE ALLOW 3-5 BUSINESS DAYS FOR PROCESSING AND APPROVAL.

MERCHANT LEGAL NAME and DBA: _____

MERCHANT NUMBER: _____

REQUESTOR PHONE NUMBER: _____

REQUESTOR EMAIL: _____

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. Be advised we may need to contact you for verification prior to approval. Please contact Merchant Services at (855) 465-9999 or via [email to support@fortispayments.com](mailto:support@fortispayments.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

Voided Check

Bank Letter

Bank Name

Bank Phone Number

Transit Routing Number / ABA Number

Account Number

Signature of Authorized Principal

(as specified on the Merchant Application/Agreement)

Date

Print Name

If you have any questions, please contact our Merchant Services department at (855) 465-9999 or email us at support@fortispay.com