DDA CHANGE ONLY FORM

Thank you for notifying us of the recent change to your business. We are happy to process the DDA change you requested for your payment processing account. The information below will help guide you through the steps, so that we can process your request.

STEP 1: CHANGE INFORMATION (Required)

Please complete entire form (Sections 1-4).

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BUSINESS INFORMATION- THE ENTIRE SECTION MUST BE COMPLETED.

TAX INFORMATION (Substitute from W-9) – For detailed instructions on completing the W-9 Form, please refer to your tax return or visit www.irs gov/pub/irs-pdf/iw9.pdf. This information is the same as the information used to file taxes for your business. It's important that this information be correct as it will be used for the required IRS 1099K reporting.

DDA CHECKING ACCOUNT INFORMATION – Please provide current DDA information for the account type that is changing, (deposit, billing, chargeback, Fusebox) as well as new DDA information. Both are required in order to make an update.

SIGNATURE INFORMATION – Must be signed by the owner or authorized signer listed on the account.

For questions, please contact us at 1-800-725-1243. Hours of Operation are 8:00am- 4:00pm Eastern Monday- Friday.

Please return the completed sections 1-4 back to Merchant.Change@elavon.com

STEP 2: We review your request.

- Once we receive your completed form, we will review for any missing information. We may contact you if additional information is required.
- If additional information is not provided within 8 business days, the request will be cancelled.
- An email notification will be sent providing the status of your request.

BUSINESS INFORMATION

(1

Merchant Identification Number (MID):		Effective Date of Change:	
DBA Name (Current):		DBA Phone #:	
Contact Name:		DBA Fax #:	Mobile Phone # :
DBA Address 1 (No PO Box):		DBA Address Type: Type:	
DBA Address 2 (No PO Box):		Email Address:	
City:	State:		Zip Code:

2 TAX IN	IFORMATION – (THIS SECTION MUST BE C	OMPLETED FOR A	ALL UPDATES)	
Business Type:	Sole Proprietor	Public Corp.	Closely Held Corp.	Sub S Corp. Professional Corporation
	Limited Partnership] Government (D=Disregarded en	Tax Exempt Organization tity, C=Corporation, S = S Corporation	Other (Assn/Estate/Trust) P=Partnership) If LLC, please indicate if D, C, S or P
Legal Business Na	ame (As shown on your business income tax retu	urns. For Sole Propr	ietors, this should always be the own	er's name)
Address Type:	Business or 🔲 Residential			Social Security #/TIN #
				or
Legal Business A	ddress (PO Box not allowed):			EIN (Employer Identification #):
		I		_
City:		State:	Zip Code:	

3 DDA CHECKING ACCOUNT INFORMATION

	ount Info	rmation	for the A	Account 1	Type tha	t is chan	ging (Rec	quired fo	r Verifica	ation)	
Current Deposit A	ccount										
ABA/Routing Number											DDA Account Number
Current Billing Ac	count			Check he	re if sam	e as Dep	osit Acco	ount		-	
						/-	1		1	7	DDA Account Number:
ABA/Routing Number:											
Current Chargeba	ck Accou	nt		Check he	re if sam	e as Dep	osit Acco	ount			
ABA/Routing										1	DDA Account Number:
Number:											
											nation below. This information is for the billing of Elavon propriate parties so the changes are made to their system
Current Fusebox B	Billing Acc	ount		Check he	ere if sam	ne as Dep	osit Acco	ount			Site ID:
ABA/Routing Number:											DDA Account Number:
MERCHANT OF IT ARISEN HAVE BEE SUCH ENTRIES IN	STERMINATION EN PAID IN FUI SAID ACCOUM	DN IN SUCH N LL, INCLUDIN NT CONCERNI rectly from A	IANNERAST G, BUT NOT L ING LEASE, merican Expi	O AFFORD EL IMITED TO, RENTAL, ORP ress (800-528	AVON REASC THOSE OBLIC URCHASE AG	DNABLE OP GATIONSDES GREEMENTSF	PORTUNITYT CRIBED IN TH OR POSTERN	TO ACT ON IT; IE MERCHAN /IINALAND/C	AND (B) ALL T PROCESSIN DRACCOMPA	OBLIGATION IG AGREEME NYINGEQUII	AS RECEIVED WRITTEN NOTIFICATION FROM NS OF MERCHANT TO ELAVON THAT HAVE ENT. THIS AUTHORIZATION EXTENDS TO PMENT. I need to notify them of your change, as each will need
Nov. Assesse											
New Accourt	nt Informa	ation									
New Deposit Account		ation									
		ation]	DDA Account Number
New Deposit Acco	ount	ation		eck here i	if same a	us Deposi	t Accoun	t]	DDA Account Number
New Deposit Acco ABA/Routing Number	ount	ation	Che	eck here i	if same a	as Deposi	t Accoun	t]	DDA Account Number DDA Account Number:
New Deposit Acco ABA/Routing Number New Billing Accou ABA/Routing	unt	ation		eck here i]	
New Deposit Acco ABA/Routing Number New Billing Accou ABA/Routing Number:	unt	ation]	
New Deposit Acco ABA/Routing Number New Billing Accou ABA/Routing Number:	unt	ation									DDA Account Number:
New Deposit Acco ABA/Routing Number New Billing Accou ABA/Routing Number: New Chargeback A ABA/Routing Number: If you also process throug Hosted Payment Fusebox as well. Note: For chain statement on the home page and sea	Account Account Gateway se ts, the billing arching with	nd would li rvice fees o g account w out enterin	Che ke to upda nly. If you vill need to ig any crite	te your ban do not use be changeo ria.	if same a k account i Elavon as y d at the ent	information rour Processity level as	on the Gat	t teway pleas r, you will the sites. Y	need to not	ify the app	DDA Account Number:
New Deposit Acco ABA/Routing Number New Billing Accou ABA/Routing Number: New Chargeback A ABA/Routing Number: If you also process throug Hosted Payment Fusebox as well. Note: For chain statement	Account Account Gateway se ts, the billing arching with	nd would li rvice fees o g account w out enterin	Che ke to upda nly. If you vill need to ig any crite	te your ban do not use be changed	if same a k account i Elavon as y d at the ent	information rour Processity level as	on the Gat	t teway pleas r, you will the sites. Y	need to not	ify the app	DDA Account Number: DDA Account Number: mation below. This information is for the billing of Elavon propriate parties so the changes are made to their system
New Deposit Acco ABA/Routing Number New Billing Accou ABA/Routing Number: New Chargeback A ABA/Routing Number: If you also process throug Hosted Payment Fusebox as well. Note: For chain statement on the home page and sea	Account Account Gateway se ts, the billing arching with	nd would li rvice fees o g account w out enterin	Che ke to upda nly. If you vill need to ig any crite	te your ban do not use be changeo ria.	if same a k account i Elavon as y d at the ent	information rour Processity level as	on the Gat	t teway pleas r, you will the sites. Y	need to not	ify the app	DDA Account Number: DDA Account Number: mation below. This information is for the billing of Elavon propriate parties so the changes are made to their system



SIGNATUREINFORMATION

By signing this document, you are agreeing on behalf of the Company to a mandatory binding arbitration provision set forth in the TOS and expressly incorporated herein. "The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding. In addition, by signing this company application, you hereby certify that to the best of your knowledge, the information provided about you, the name and address provided for the legal entity customer, and the information provided about the beneficial owner(s) and/or the individual with control over the legal entity customer is complete and accurate. Please Notify Elavon if there are changes in your beneficial ownership structure or if your company has the ability to issue bearer shares.

Owner / Officer Signature X	Printed Name	Title	Date
Owner / Officer Signature X	Printed Name	Title	Date

For BANK/INTERNAL USE ONLY						
Rel	Pend Reason	Approved	Keyed	Validated		