Bank Account Change



Bank Account Change Requirements

- 1. The **owner/officer** of the company must complete and sign this form.
- 2. Send a corresponding **Voided Pre-printed Check** *or* **Bank Letter** for the new account(s). (Starter Checks, Temporary Checks, & Deposit Slips are not acceptable.)
- Attach a copy of the account owner/officer's Driver's License or Government-Issued Photo ID.



Current Bank Account Information

Current Merchant Bank Account Information											
SETTLEMENT ACCOUNT											
ROUTING NUMBER – 9 digits									ACCOUNT NUMBER		
BILLING ACCOUNT Check if same as SETTLEMENT ACCOUNT											
ROUTING NUMBER – 9 digits								ACCOUNT NUMBER			

New Bank Account Information

No. Marchael Bard, Associated Springer										
New Merchant Bank Account Information										
SETTLEMENT ACCOUNT										
This account will be debited for credit (refund) transactions/late returns and credited for debit (payment) transactions.										
Please ensure ACH Debits are enabled for this account.										
ROUTING NUMBER – 9 digits	ACCOUNT NUMBER									
If not a Business Checking account, please indicate account type:										
BILLING ACCOUNT Check if same as SETTLEMENT ACCOUNT										
While standard processing fees will not be billed directly to merchants using the Cash Discount Program, any monthly and one-time fees										
indicated on the application will be automatically debited from the bank account listed below. Please ensure ACH Debits are enabled for this										
account.										
ROUTING NUMBER – 9 digits	ACCOUNT NUMBER									
	7									
If not a Business Checking account, please indicate account type:										
Additional Information										
COMPANY NAME	SITE ID / MERCHANT ID									
REASON FOR BANK CHANGE										
REASON FOR BAING CHANGE										

I hereby certify that I am a duly appointed authorized agent to sign on behalf of the Company and I authorize iCheckGateway.com to credit and debit the above account(s) as agreed in the ACH Processing Agreement.

Owner/Officer Signature:	Date:
Print Owner/Officer Name:	Title:
Email Address:	Phone: