

Merchant Services

BANK ACCOUNT NUMBER FOR ACH DEBITS/CREDITS CHANGE REQUEST FORM

**IMPORTANT - PLEASE READ BEFORE PROCEEDING:
ALL INFORMATION LISTED IS REQUIRED AND MUST BE COMPLETED.
PLEASE FAX THIS REQUEST FORM AND A VOIDED CHECK TO
DATA PROCESSING AT (949)470-7915.
THIS REQUEST WILL NOT BE EFFECTIVE UNTIL THE REQUIRED
DOCUMENTS ARE PROVIDED AND APPROVED.
*Thank you for your cooperation.***

Merchant Name: _____

Merchant Number: _____

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. Please contact Merchant Services at (800) 418-9285 ext 227 or via email to support@ecxoc.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: (Must be a checking account)

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

Phone

Email Address

If you should have any questions, please contact our Merchant Services department at (800) 418-9285 or email us at support@ecxoc.com

A \$25.00 processing fee will be charged to the new checking account.