



DBA CHANGE REQUEST FORM

Phone: 888.690.7555 | Fax: 818.700.3106 | Email: accountservicing@paceps.com

Business Name _____ Merchant Number _____

Owner Name _____ Email Address _____

I/we request a change in the "Doing Business As" or "Legal Name" on file; below is our updated account information:

OLD DBA: _____

OLD LEGAL NAME: _____

NEW DBA: _____

NEW LEGAL NAME: _____

NEW TAX ID: _____

Signature _____ Date _____

NOTE: IF LEGAL NAME HAS CHANGED AND/OR A NEW TAX ID HAS BEEN ISSUED, PROVIDE THE FOLLOWING:

- A NEW MERCHANT AGREEMENT
- A NEW DDA CONFIRMATION
- THIS COMPLETED FORM

ALL CHANGES WILL BE COMPLETED BY THE END OF MONTH TO ENSURE PROPER STATEMENT REPORTING.

Pace Payment Systems appreciates your continued business!

Payment Processing Done the Right Way.

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