



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!

www.pacepayment.com

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