



DDA 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 depository checking account on file; below is our new checking account information:

NEW BUSINESS CHECKING ACCOUNT INFORMATION

NEW BANK NAME : _____

NEW BANK PHONE NUMBER : _____

NEW ROUTING & TRANSIT NUMBER : _____

NEW ACCOUNT NUMBER : _____

Signature _____

Date _____

NOTE: PLEASE PROVIDE THE FOLLOWING:

- COPY OF VOIDED CHECK OR BANK DDA CONFIRMATION LETTER
- THIS COMPLETED FORM
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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.

www.pacepayment.com

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