

# AUTHORIZATION FOR CHECKING ACCOUNT CHANGE



## BANK CHANGE FORM

I hereby authorize AFS (Agile Financial Systems) to change the checking account affiliated with my merchant processing account and additional services: (check all that apply)

### Gateway Account with AFS

### APEX ACH

Merchant Doing Business Name :

V/MC Merchant Number :

Reason for Bank Change :

Account Type: Please Choose One :  Checking  Savings

Account Purpose: Please Choose One :  Personal Account  Business Account

Bank Name :

Bank Location :

Bank Routing Number (ABA) :   
(This is always 9 Digits Long)

Account Number (DDA) :

Authorized Signer (Sign here) :

Authorized Signer (Print Name) :

Date :

**\*\*\* Please send a copy of a pre-printed VOIDED CHECK or BANK LETTER with this authorization \*\*\***  
**Please return this form back to us via Fax - 888-389-9307 or Email to Underwriting@go-afs.com**

**\*\*\*IF YOU ALSO ACCEPT AMERICAN EXPRESS ESA DIRECT YOU WILL NEED TO CONTACT AMERICAN EXPRESS (1-800-528-5200) TO CHANGE YOUR CHECKING ACCOUNT\*\*\***

THANK YOU FOR YOUR INFORMATION

QUESTIONS?

If you have any questions, please call Customer Support at 888-708-8019.