

## **Customer Information Change Request**

NOTE: This form is to be used for personal change of addresses only.

Online Banking users may change their contact information when logged in.

Business customers must request an address change in person, at a branch or drive-up.

It is important to maintain current information with us so that we can continue to provide you with excellent customer service. If you wish to update your address, phone number, or email please fill out this form and bring to your local branch along with your Driver's License:

**NOTE:** A form MUST be completed for EACH accountholder. **Current Information** Name: SSN or EIN: \_\_\_\_\_ Address Line 1: \_\_\_\_\_ Phone: Address Line 2: \_\_\_\_\_ Email address: City, State, Zip: \_\_\_ New Information (may be used for Seasonal address changes also) Phone - Home: \_\_\_\_\_ Name: Phone - Work: \_\_\_\_\_ Address Line 1: \_\_\_\_\_\_ Address Line 2: Phone - Cell: City, State, Zip: \_\_\_\_\_ Email address: Physical Address (if different): If applicable: Start Date End Date Account Number(s) Check box if applies to all accounts Other services (check all that apply): **-OR-** List specific account(s) the change applies to ATM/Debit Card (last 6 digits): Online Banking/Mobile Banking Bill Payments/Zelle **Trust Services ESSA Stock Certificate** Commercial Lending **Authorization:** By signing below, I hereby acknowledge that the information provided above is true and correct and authorize you to make the indicated changes in your records for the account(s) identified above. This change applies to all accounts on which I am the primary account holder. I certify that I indemnify you from any and all claims related thereto. Customer Signature Date For Bank Use Only: Branch/ Teller\_\_\_\_\_ Initials \_\_\_\_\_ Date \_\_\_\_\_

Deposit Ops: \_\_\_\_\_ Initials \_\_\_\_\_ Date \_\_\_\_\_Verifier Initials \_\_\_\_\_ Date

