**CUSTOMER CHANGE AUTHORIZATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **CUSTOMER INFORMATION CHANGE/CORRECTION**  **If correcting taxpayer ID #, complete the Back-Up Withholding Certificate below.** | | | | | |
| **Check Box**:  Add signer Change Name Change Address Change phone #  Change Birth Date Change SSN/EIN  **CONFIRM THE IDENTITY OF THE PERSON MAKING THE CHANGE REQUEST BEFORE PROCESSING.**  **List Account Numbers Affected**:      **Staff Initials Confirming ID**: | | | | | |
| Name |  | | Work Phone |  | |
| New Address  Mailing  Residence/ Business location |  | | Home Phone |  | |
| Birth Date |  | |
| Email |  | | SSN/EIN |  | |
| **ACCOUNT TYPE CHANGE**  **If changing to an interest bearing type of account, must complete and sign Back- Up Withholding Certification below** | | | | | |
| Account Number | | Old Account Type | | | New Account Type |
|  | |  | | |  |
| **TAX ID DESIGNATION/ADDITION/CORRECTION**  **Primary Owner’s Social Security Number/Tax ID# will be used for tax reporting**  **Backup withholding certification (below) must be completed when changing the Tax ID# of the primary owner** | | | | | |
| Account Number: | | IRS Name: | | | Tax ID #: |
| Primary Owner: | | From Tax ID #: | | | To Tax ID #: |
| Secondary Owner: | | From Tax ID #: | | | To Tax ID #: |
| **MISCELLANEOUS CHANGE** | | | | | |
| Account Number: | | | Customer Name: | | |
| Explanation/Request: | | | | | |

I hereby desire and authorize the above change(s)

Signature Date

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **BACKUP WITHHOLDING CERTIFICATION** | | | | | |
| **Under penalty of perjury, I certify [check all applicable response(s)]**  that the number shown on this form is my correct taxpayer identification number. (W-9)  that I am not subject to backup withholding either because (a) I am exempt from backup withholding, or (b) I have not been notified that I am subject to backup withholding as a result of failure to report all interest or dividends or (c) the Internal Revenue Service has notified me that I am no longer subject to back up withholding. (W-9)  that I am exempt because of **FOREIGN STATUS** (complete information below). (W-8)  **INDIVIDUAL:** This account is held by an individual or by individuals who are neither citizens nor residents of the United States. I am/We are citizens  Of and hold passport number .  **OTHER THAN INDIVIDUAL** This account is held by a corporation, partnership, estate, trust of other organization which is not organized in the United States, is not engaged in trade or business within the boundaries of the United States, and is not subject to United States income tax, on income derived from sources outside the United States. In signing this declaration, I further certify under penalties of perjury that I am properly authorized to sign on behalf of the above entity.  **CERTIFICATION** Under penalties of perjury, I certify that the taxpayer identification number and W-9/W-8 information provided on this form are true, correct and complete.  **Signature: Date:** | | | | | |
| **ACCOUNT MAINTENANCE** | | | | | |
| **Check Box:**  Account Restriction  Priority Miscellaneous Note  Teller Alert  Responsibility Code Changes  Other  **List Account Numbers Affected**: | | | | | |
| Requested by: | Changed by: | | Start Date: | | Expiration Date: |
| Changed From: | Changed To: | |
| Explanation/ Reason:  **Signature:**  **Date:** | | | | | |
| **BANK USE ONLY** | | | | | |
| Branch Rep Signature: | | Branch Mgr. Signature: | | Date: | |
| **If any changes to a Bank stockholder’s information, must also notify the Bank CFO.** (Verify warning at **PORT** level) | | | | | |