

🇺🇸 BANK ACCOUNT UPDATE



Merchant DBA*: _____ MID*: _____

Principal Account Holder*: _____

Requested By*: _____

Update Banking Info (Please attach a voided check OR DDA Verification letter from you bank to this request to be processed)

Bank Name: _____

Business Account Personal Account (if personal account being used, business must be Sole Prop or Single member LLC)

Name on Account: _____

Account Number: _____ Checking Savings

Account Use: All (Default) Deposits Fees Chargebacks

Routing Number: _____

Dual Banking Banking Information #2 (optional)

Bank Name: _____ Merchant Legal Name: _____
(or full name on checks)

Routing Number: _____ Account Number: _____

Phone Number: _____

Specific Account Type: Checking Savings Account Use: Deposits Fees Chargebacks
(select all that apply)

Banking Information #3 (optional)

Bank Name: _____ Merchant Legal Name: _____
(or full name on checks)

Routing Number: _____ Account Number: _____

Phone Number: _____

Specific Account Type: Checking Savings Account Use: Deposits Fees Chargebacks
(select all that apply)

Signature Of Principal On Account*: _____

Principal Phone Number: _____

Principal Email Address: _____ Date: _____

1. Send completed form to: research@clearent.com (recommended) or fax to 866.443.9954
2. Please allow 3 business days for the update to be completed.
3. You will receive an email from research@clearent.com once your update has been completed. Be sure to check your junk/spam!

Clearent Only Merchant Board Date: _____ Completed By: _____

Notified How: _____ Date: _____

Risk Review Date: _____ Risk Approval: Yes No Risk Initials: _____