



CLOSE MERCHANT ACCOUNT CHANGE REQUEST FORM

Merchant Name: _____

Merchant Number: _____

Reason for Closure:

- Do Not Need Credit Card Services
- Out of Business
- New Business Ownership
- Chose Different Credit Card Processor
- Misrepresentation
- Dislike Merchant Statements
- Fees too High
- Poor Service from 1st National Merchant Services
- Poor Service from Sales Representative

Note: Reason must be checked in order for 1st National to properly close merchant account. Thank you.

If applicable, does merchant wish to close checking account with 1st National?

- Yes Checking Account Number: _____
- No

Merchant will obtain existing funds by:

- writing a check for the balance in account.
- requesting 1st National to pay merchant via check for balance in account.

Current Address: _____

Street

City

State

Zip Code

Current Phone Number: _____

Signature of Authorized Merchant Principal (as specified on the Merchant Application/Agreement) **Date**

Fax Completed Request to New Accounts Processing at (209) 320-2108

Note: Change request will not be completed unless the merchant completes all pertinent information above and signature is verified by 1st National personnel. Thank you for your cooperation.

If you should have any questions, please contact our Merchant Services department at (800)396-5660 or email us at info@1stnationalmerchant.com