

Printed Name

AUTOMATIC PAYMENT CHANGE REQUEST

Complete a separate form for each payment. This form may be copied. Don't forget that many automatic payments can be set up directly through Heritage Bank's Online Bill Pay! ☐ Change ☐ New **Customer Information** Name Date Address City, State, Zip code Phone Vendor / Payee Information (Complete as much as possible) Name Date Address City, State, Zip code Phone **New Bank Information Financial Institution: Heritage Bank Routing Number: 265470158** ☐ Checking ☐ Savings Account Number: Effective immediately, I authorize the above referenced Vendor/Payee and Heritage Bank to initiate entries into my Heritage Bank account. This authorization will remain in effect until I notify the referenced vendor in writing to cancel this request within a reasonable amount of time. Signature Date