

Signer Change Request Form



Please submit the following information to modify the financial signer related to your merchant account with CardConnect. Please type or print neatly (application will be returned if illegible).

IMPORTANT: Only the application signer/account owner is permitted to submit a signer change request. Forms submitted by any other party will be rejected. If you are unsure who the account owner is, then please email Support at support@givesmart.com.

If the Legal Name/TIN of the organization has also changed, a new merchant application will be required. Please email Support at support@givesmart.com for next steps.

| | |
|-----------------------------|-------|
| Merchant ID Number | _____ |
| Merchant Legal Name | _____ |
| Merchant Phone Number | _____ |
| Existing Legal Signer Name | _____ |
| Existing Legal Signer Title | _____ |
| New Legal Signer Name | _____ |
| New Legal Signer Title | _____ |
| Reason for Change | _____ |

ATTENTION: The following attachments are REQUIRED to complete the Signer Change:

- 1) Completed Signer Change Request Form.
- 2) One of the following to prove the new signer is part of the organization: Corporate Minutes confirming the signer to their position, Corporate Board of Resolution, or Articles of Incorporation or Organization.
- 3) The new account owner must provide their Title, Home Address, Date of Birth or Driver’s License for the new contact. Otherwise, the processing of your request will be delayed.

IMPORTANT: If submitting this form via email, the Account Owner should include this request in the body of your email. If submitting this form via fax, please include a written letter specifying this request form. Submission steps below.

Merchant Signature

I certify that I am either the current account owner and/or business owner and that the above change does not represent a change in ownership. I further certify that I am authorized to approve the above changes for the merchant named and the information supplied is both true and accurate.

I authorize you to request and obtain from a consumer-reporting agency, personal and business consumer reports. I also authorize you to obtain subsequent consumer reports in connections with the maintenance, updating, renewal, or extension of the merchant agreement. I agree that all references, including banks and consumer reporting agencies, may release any and all personal and business credit financial information to you.

Merchant Signature

Date

Merchant's Printed Name

Merchant's Title

Form Submission Steps:

- 1) Please email or fax this form and the required documentation to the agent listed below. We ask you submit these together to ensure your form is processed as quickly as possible.
- 2) Please be aware that it can take at least 7-10 business days upon submission of this form to implement changes.
 - a) During the approval process the representative listed on the merchant application will receive a call from a CardConnect security team member to:
 - i) Verify the change.
 - ii) Ensure the accounts in question are still in good standing so no Risk flags are raised.
- 3) The GiveSmart agent will email you once the update has been made.

For Office Use Only

Date

GiveSmart Support

Agent Name

(855) 322-4483

Agent Phone Number

(737) 225-8876

Agent Fax Number

Support@givesmart.com

Agent Email Address

Merchant DBA

***Will display on receipts for all entities**

Merchant Tax ID