



Change of Merchant Credit Card Processing Form

Use this form to switch your credit card processing to Watertown Savings Bank.

Date: _____

This form confirms and is my authorization that my business: _____
has a business checking account with (Bank Name) _____
that utilizes a credit card processing machine. This account can accept both debits and credits.

Please provide the name and address of your current card processing merchant.

Merchant Name: _____

Merchant Address: _____

Please accept this letter as my request to change the bank account and information for such processing to:

Watertown Savings Bank Account Number: _____

Watertown Savings Bank ABA Routing Number: **2 2 1 3 7 1 3 5 6**

CHECKING ACCOUNT

SAVINGS ACCOUNT

Watertown Savings Bank - 111 Clinton Street, Watertown, NY 13601 315-788-7100

If you should have any questions regarding this transaction, please contact me at this phone number: _____

Sincerely,

Customer Signature