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| Date: |       |
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| [x]  | Outlet Only \* | MID #: |       | Effective Date |       |
| **\* Please note: North MID # - if 1-5 Merchants with the same type of update – please list each MID number/request type on separate forms and submit for each account.****If 6 or more merchants with the same update – please attach an Excel spreadsheet listing DBA Name, MID # and type of update.** |
| Business DBA/Legal Name: |       |
| \*Person Requesting Change: |       | Title: |       | Phone #: |       |
| \*Person should be Owner, Officer or Legal Contact. Does not include Manager, Clerk etc. |  |

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|  | **Current Value** | **New Value** | **Reason for Change** |
| Federal Tax ID: |       |       |       |
| **NOTE:** To complete the change to your Federal Tax ID #, an attached copy of your Federal Tax ID Certificate is required. |
|  |  |  |
|  | **Current Value** | **New Value** | **Reason for Change** |
| DBA Name Update (Incorrect/Misspelled) |       |       |       |
| **NOTE: If correcting the DBA Name – does not require Merchant Signature below** |
|  |  |  |
|  | **Current Value** | **New Value** | **Reason for Change** |
| Legal Name/DBA Name: |       |       |       |
| Contact Name & Title\* |       |       |       |
| **\*Note**: If the Legal Signer’s name has changed, please include corporate minutes or meeting notes |
| **Before the Legal business name/DBA Name can be changed, please attach one (1) of the following supporting documents** **(select one)** |
| [ ]  | Business certificate (License or Fed Tax ID Certificate) |
| [ ]  | Corporate Seal |
| [ ]  | Articles of Incorporation |
| [ ]  | IRS Tax Exemption Certificate |
| \*\*\* **BOS will forward to credit for approval. Please allow 3-5 business days upon receipt for this request \*\*\*** |

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| **NOTE: DBA Name Changes cannot be updated if one or more of the following applies (Contact Telesales (1-800-443-5024 for new MPA):** |
| Nature of Business/Industry Type is changing |
| Keyed transactions to swiped transactions |
| Change from Card Swipe to Non-Swipe or to MOTO/Internet |

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| Merchant Signature (Required) |       | Date: |       |
| Channel Approval Signature (if applicable) |       | Date: |       |
| Channel Email Address (Required) | support@integritymerchantsolutions.com | Phone Number: | 8662573250 |