



Address/Phone Change Form

Account Name/Business Name

Account Numbers**

**Please list ALL checking, savings, loans, certificates of deposits, safe deposit boxes, and ATM cards that need to be updated. Include any closed accounts for tax reporting purposes. Only those accounts listed will be updated.

Account Signer 1
(Please list current and/or New Phone numbers.
Phone numbers not listed will be Deleted)

Phone Number

Home - -

Cell - -

Business /Work - -

Social Security Number/Tax ID Number

Signature*

*By signing this request, only the accounts that you are an authorized signer on may be changed.

Old Address

Number and Street

Apt/Suite#

PO Box #

City

State

Zip Code

Effective Date

New Address

Number and Street

Apt/Suite#

***PO Box #

City

State

Zip Code

Check here if Seasonal - -

Dates from

Seasonal Phone Number

To

MM/DD

MM/DD

***Include your physical address when filling in a PO Box number.

Account Signer 2

(Please list current and/or New Phone numbers.
Phone numbers not listed will be Deleted)

Phone Number

Home - -

Cell - -

Business /Work - -

Social Security Number/Tax ID Number

Signature*

*By signing this request, only the accounts that you are an authorized signer on may be changed.

**Multiple signature accounts shall require all signatures.
Please attach another request if more signature lines are needed.**

Please print, sign and mail to:
Monroe Bank & Trust 102 E Front St. Monroe, MI 48161
Attn: Deposit Operations
or drop off at any MBT office

Branch/Dept USE ONLY

Current Port #: _____

Customer Signature Validated by:

- DL Passport
 State ID Sig Card
 Other _____

By signing this form, you are validating the customers identity.

Employee Signature: _____

Branch/Dept: _____ Date: _____

Comments: _____

Deposit Ops USE ONLY

New Port #: _____

Changed by: _____

Date: _____ Signature Verified

Verified by: _____

Date: _____ Signature Verified

Comments: _____
