
ACCOUNT MAINTENANCE

This form is provided so you can make changes to your account. Once the changes are made to this form, print it out and fax it to (317) 218-2187. Please contact us at (317) 218-2180 if you have any questions. *Do not email this form as it may contain sensitive information.*

Customer Name: _____

Address Change

Current Address _____ City _____ State _____ Zip _____

New Address _____ New City _____ New State _____ New Zip _____

New Address _____ New City _____ New State _____ New Zip _____

Phone Number Change

Current Home Phone _____ New Home Phone _____

Current Business Phone _____ New Business Phone _____

Current Mobile Phone _____ New Mobile Phone _____

Email Address Change

Name _____ Current Email Address _____ New Email Address _____

Name _____ Current Email Address _____ New Email Address _____

Account Type Change

Account Number _____ Current Account Type _____

Change to Account Type: _____

Statement Delivery Change

Account Number _____

Current Statement Delivery Type _____ New Statement Delivery Type _____

If customer is opting for E-statement delivery the E-statement agreement must be completed. This document can be found at:
<http://www.indianabusinessbank.com/tools/forms/default.aspx>

Add a New/Replacement ATM/Debit Card

Card Number

ATM Card ATM/Debit Card

New Replacement. If replacement please check reason: Damaged Lost Stolen

Beneficiary Add/Change

Account Number(s)

Name	Relationship	SSN/TIN
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Name	Relationship	SSN/TIN
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Name	Relationship	SSN/TIN
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Add Account Signer (Please provide copy of driver's license)

Account Number(s)

Name	Relationship	SSN/TIN
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Date of Birth	Home Phone	Business Phone	Mobile Phone
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Address	City	State	Zip
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Email Address	Identification	Mother's Maiden Name
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Employer	Address
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Place a Stop Payment

Check ACH

Account Number

\$

Dollar Amount	Check Series	Payee
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I/We authorize Indiana Business Bank to make the changes to my/our account(s) which are listed above.

Signed: _____

Date: _____

Printed _____

Signed: _____

Date: _____

Printed _____

BANK USE ONLY	
Port #:	_____
Employee:	_____
Date:	_____