

Athol Savings Bank  
**ADDRESS CHANGE REQUEST**

Accepted by: \_\_\_\_\_  
Init \_\_\_\_\_ Branch \_\_\_\_\_

Name (please print): \_\_\_\_\_ Social Security # \_\_\_\_\_

My address has changed and this address is (choose One) :

PERMANENT EFFECTIVE \_\_\_\_\_ date  
 TEMPORARY – UNTIL\* \_\_\_\_\_  
\* will return to 'old address' after this date  
 SEASONAL – Each year from \_\_\_\_\_ - \_\_\_\_\_

**OLD ADDRESS**

Street: \_\_\_\_\_ P.O.Box: \_\_\_\_\_

City/St/Zip: \_\_\_\_\_

**NEW ADDRESS**     PRIMARY     RESIDENTIAL     BOTH

Street: \_\_\_\_\_ P.O.Box: \_\_\_\_\_

City/St/Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**ALTERNATE ADDRESS**

Street: \_\_\_\_\_ P.O.Box: \_\_\_\_\_

City/St/Zip: \_\_\_\_\_ Account(s) \_\_\_\_\_

**TEMPORARY/SEASONAL ADDRESS**

Street: \_\_\_\_\_ P.O.Box: \_\_\_\_\_

City/St/Zip: \_\_\_\_\_

Please check appropriate request

Change the address on **ALL** my accounts **OR**  Change **ONLY** the accounts listed below:

Deposit Accounts: \_\_\_\_\_

Loan Accounts: \_\_\_\_\_

**Do any of these apply:**

→ I have safe deposit box # \_\_\_\_\_ located at: \_\_\_\_\_

→ I have an Athol Savings Bank ATM / Debit Card     Yes     No

→ Other household members are affected by this change     Yes *customer must fill out reverse side*     No

→ I have: **Online Banking**     No     Yes    If Yes, Reason for Form? \_\_\_\_\_

→ I have: **Bill Pay**     No     Yes

Please **DO NOT** send backdated account statements     Please send **ALL** backdated account statements

☞ I certify that the above information is correct: \_\_\_\_\_ Date: \_\_\_\_\_

✍ Customer Signature

_____	_____
Maintained By	Date changed
[ ] <b>I have reviewed all profiles for any applicable alternate addresses</b>	
[ ] Copy sent to <b>Loan Servicing</b> - if applicable	[ ] Copy sent to <b>branch where safe deposit box is located</b> - if applicable
[ ] Copy sent to <b>Internet Banking Department</b> - if applicable	

**Other Household Members Affected by Change of Address**

Please Change my address to that which is indicated on the reverse side:

Name (please print) \_\_\_\_\_ Social Security # \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

→ I have:  ATM / Debit Card  Online banking  Bill Pay

Signature: *✍* \_\_\_\_\_ Date: \_\_\_\_\_

Check if customer is a minor and authorization is by parent/guardian.

Please Change my address to that which is indicated on the reverse side:

Name (please print) \_\_\_\_\_ Social Security # \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

→ I have:  ATM / Debit Card  Online banking  Bill Pay

Signature: *✍* \_\_\_\_\_ Date: \_\_\_\_\_

Check if customer is a minor and authorization is by parent/guardian.

Please Change my address to that which is indicated on the reverse side:

Name (please print) \_\_\_\_\_ Social Security # \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

→ I have:  ATM / Debit Card  Online banking  Bill Pay

Signature: *✍* \_\_\_\_\_ Date: \_\_\_\_\_

Check if customer is a minor and authorization is by parent/guardian.

Please Change my address to that which is indicated on the reverse side:

Name (please print) \_\_\_\_\_ Social Security # \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

→ I have:  ATM / Debit Card  Online banking  Bill Pay

Signature: *✍* \_\_\_\_\_ Date: \_\_\_\_\_

Check if customer is a minor and authorization is by parent/guardian.