

**PARKWAY BANK ARIZONA**  
**PERSONAL ACCOUNT**  
CHANGE OF ADDRESS AUTHORIZATION FORM

DEAR: \_\_\_\_\_

DATE: \_\_\_\_\_

WE HAVE LEARNED THAT YOUR ADDRESS HAS CHANGED:

- BY YOUR CORRESPONDENCE TO US
- BY DIRECT REQUEST FROM A BANK REPRESENTATIVE
- BY NOTIFICATION FROM THE POSTAL SERVICE

TO PROCESS THIS CHANGE ACCURATELY, WE REQUEST THAT YOU COMPLETE ALL OF THE FOLLOWING INFORMATION AND RETURN THIS FORM IN THE ENCLOSED ENVELOPE.

**(PLEASE NOTE! WE WILL CHANGE ONLY THE ACCOUNT NUMBERS THAT YOU HAVE LISTED AND ONLY IF YOU HAVE THE AUTHORITY TO DO SO.)**

NAME: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

SOCIAL SECURITY # OR TAX ID#: \_\_\_\_\_

NEW PHYSICAL ADDRESS:

NEW MAILING ADDRESS:


NEW HOME PHONE#: (    ) \_\_\_\_\_

NEW WORK PHONE#: (    ) \_\_\_\_\_

CELL PHONE#: (    ) \_\_\_\_\_

**DO YOU HAVE AN ATM OR VISA DEBIT CARD?**     **YES**         **NO**

LIST ALL ACCOUNT NUMBERS TO BE CHANGED


LIST ALL OTHER MEMBERS OF YOUR HOUSEHOLD WHO WILL BE MOVING WITH YOU:

\_\_\_\_\_  
YOUR ACCOUNT INFORMATION (DEPOSIT, LOAN, ETC.) WILL BE CHANGED IMMEDIATELY UPON OUR RECEIPT OF THIS SIGNED AND DATED FORM.

\_\_\_\_\_  
CUSTOMER SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CUSTOMER SIGNATURE

\_\_\_\_\_  
DATE

THANK YOU FOR YOUR COOPERATION. WE APPRECIATE YOUR BUSINESS!!

*"YOUR COMMUNITY BANK"*

OFFICE USE ONLY:

- DATE & BRANCH RECEIVED: \_\_\_\_\_
- CHANGE ENTERED BY: \_\_\_\_\_
- IDENTIFIER(S) USED: \_\_\_\_\_