

# Notice of Change for Automatic Payment

Please change my automatic payment.

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Name of insurance company, mortgage provider, utility company, any payee that automatically debits payments from your account:

\_\_\_\_\_  
Address:

\_\_\_\_\_  
City:

\_\_\_\_\_  
State:

\_\_\_\_\_  
Zip Code:

## To Whom It May Concern:

Currently, you are debiting my \_\_\_\_\_ payment from my old bank account(s).  
(Indicate the type of payments the payment is for)

## Current Bank Information:

\_\_\_\_\_  
Bank Name:

\_\_\_\_\_  
Routing Number:

\_\_\_\_\_  
Account Name :

\_\_\_\_\_  
Account Number:

Please stop debiting from this account on \_\_\_\_\_ and start debiting this payment from my new account at The Hamilton Bank. (Date)

## New Bank Information:

The Hamilton Bank Routing Number: 101918075

The Hamilton Bank Checking Account Number: \_\_\_\_\_

Please send me confirmation indicating when this change takes effect. If you have any questions regarding this request, please contact me.

Sincerely,

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Printed Name:

\_\_\_\_\_  
Address:

\_\_\_\_\_  
City:

\_\_\_\_\_  
State:

\_\_\_\_\_  
Zip Code:

\_\_\_\_\_  
Account Number with Payee:

\_\_\_\_\_  
Phone Number (day):

\_\_\_\_\_  
(Evening):