

The Muncy Bank & Trust Company
Change of Address Request

To Whom It May Concern:

SEE BACK OF FORM FOR GUIDANCE.

Please change my **physical street** address (Cannot be a P.O. Box)

from: _____
_____ Phone # _____

to: _____
_____ Phone # _____

Please change my **mailing** address (if different from street address)

from: _____
_____ Phone # _____

to: _____
_____ Phone # _____

Please change/add my **alternate** address for account number(s) _____ only.

from: _____
_____ Phone # _____

to: _____
_____ Phone # _____

Please check if seasonal and indicate ending date. _____

Addresses on all accounts will be changed unless the change should be limited to the account numbers listed below:

If there are other accounts (such as custodial accounts) requiring an address change please list. _____

All owners of accounts must sign below.

(Customer's Signature) (Please Print Name) (Date)

(Customer's Signature) (Please Print Name) (Date)

(Do not write below this line – Bank use only.)

(Date Received) (Received) | Signature Verified, | (Date) Changed By)

(Date Verified) (Change Verified By)

Guidance to complete the Change of Address Request Form

Complete the top block for “**physical street**” address with the old and new address of where you actually reside. This is your *primary residence* as opposed to a vacation or temporary home. This physical address cannot be a post office box number. *All of your written communications and statements will be mailed to this address unless you instruct us to mail correspondence and statements to a different address, your “mailing address.”*

Complete the middle block for a change in, or the establishment of, your “**mailing address.**” *Fill this block only if your mailing address is different from your primary residence(physical street address).* This will be where *all* of your written communications and statements from The Muncy Bank and Trust Company will be mailed. **For example:** You may live at 123 Overhead Drive, Muncy but you want your mail to be addressed to your Post Office Box #999.

Only complete the “**alternate address**” section for temporary changes in where you want your correspondence and statements to be mailed. For example if you travel to Florida to live during the winter months you would complete this section and indicate the time period that this alternate address applies.

It is important that you also provide us with a current phone number(s), so that we may contact you if there are any questions or to confirm that you actually authorized the change of address.

It is important that you both sign and print your name on the form. We compare your signature to your signature that we already have on file. This is another step we perform to help protect you from being a victim of identity theft.

Please do not hesitate to contact us with any questions you have at 570-546-2211 or toll free 877-243-8919.