

Authorization to Change My Recurring Debit Card Payment

To:

Re: Account Number with Company

I have opened a new account at NBT Bank. Please withdraw my payment from this account using my new debit card.

NBT Bank Debit Card #: _____

Expiration Date: ____ / ____
Month/Year

From: _____

Name: _____

Address: _____

City/State/Zip: _____

Telephone #: _____

Signature: _____

Date: _____

If you are unable to accept this form, please mail your authorized form to me at the address above.