Change Request Registered Business / Trading Name to appear on receipts

Why Use This Form?

Please use this form if you wish to advise of a change to your Registered Business / Trading name or if you have recently Registered your Business name and the nature of the business remains the same.

If this is due to a change in ownership or the nature of the business has changed please contact us on 13 11 75 as a new application is required.

Merchant Details			
Merchant Number	Merchant number can be found at the top of any receipt from the EFTPOS terminal (underneath the suburb) OR on your merchant statement.		
Current Merchant Trading	Name		
Contact Name			
Contact Number	The merchant facility will be updated to reflect the above contact name and number.		
Email Address			
	Providing an email address will enable us to notify you that the requested change has been actioned.		
Note: You may be contacte	ed by our technical support tea	am once the request is approved to activa	ate the change on the terminal.
Change Registered Bus	siness / Trading Name and	name to Appear on Receipts	
Is the Merchant Trading Nar	me registered?	No Customer Number	(Suncorp Bank Sales
ABN/ACN			Consultant use only)
Nature of Business			
New Merchant Registered Business / Trading Name			
Note: Below field is mandatory if the Registered Business / Trading Name has changed			
Change Name to Appear on Receipts (For Shop Front – must be name above the door)			
(Maximum of 22 characters, the following "symbols" are not able to be used - ', ", /, ?, @, +, _, `, [)			
Authorisation - To be o	completed by a person wi	th FULL access on the merchant fa	acility
I/we agree that the execution of this form, and the communication of that execution, by electronic means, including through the DocuSign system			
and via emails sent from ar	n email address designated by	\ensuremath{me} as the address for communications,	is legally binding on me/us even if not authorised.
I/we agree to immediately	notify the Bank of any change	s to my/our email address.	
Signature			
Date:	DD/MM/YYYY		
Name:			
Signature			
Date:	DD/MM/YYYY		
Name:			
Please note: All fields to be completed before we can process your request			
How to Lodge			

Fax to: (07) 3031 2177

Scan and submit via email to: MerchantServices@suncorpbank.com.au

Mail to: Suncorp Bank (4RE007)

GPO Box 2432 Brisbane QLD 4001

