

# Step Two

## Automatic Payments Authorization

If you have any questions,  
we will gladly talk you through it.

**1.877.Bangor1**

**This serves as notification of a change in my automatic payment information. Effective immediately, you are authorized to establish an automatic payment deduction from my Bangor Savings Bank account.**

### BILLER INFORMATION

The company or organization that receives automatic payment.

NAME OF COMPANY/ORGANIZATION

PHONE

ADDRESS

CITY

STATE

ZIP

### CUSTOMER INFORMATION

The person from whose account the automatic payment is made.

NAME

BILLING ACCOUNT NUMBER

ADDRESS

CITY

STATE

ZIP

### BANK ACCOUNT INFORMATION

Bangor Savings Bank Routing Number: 211274382

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

Checking  Savings

### AUTHORIZATION

Account Holder Signature: \_\_\_\_\_

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

Account Holder Signature: \_\_\_\_\_

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

Please acknowledge your receipt of this notice by sending confirmation of this change to the address listed under CUSTOMER INFORMATION. Please notify customer immediately if this form is not sufficient to complete the requested change.