

## CHANGE OF ADDRESS FORM

I, \_\_\_\_\_, here by authorize the information regarding  
Customer's full name –PLEASE PRINT

my address on all accounts held in my name at Citizens Bank of Chatsworth, to be

Changed to:

\_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
CITY, STATE, ZIP CODE

\_\_\_\_\_  
NEW PHONE NUMBER

This change of address should be put into effect as of \_\_\_\_\_.

Please change my address on my debit card # \_\_\_\_\_  
credit card# \_\_\_\_\_  
(Last 5 digits or write DO NOT HAVE)

Other family names to be changed or special instructions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
CUSTOMER'S SIGNATURE

\_\_\_\_\_  
DATE

Received: \_\_\_\_ in person \_\_\_\_ fax \_\_\_\_ telephone \_\_\_\_ mail \_\_\_\_ e-mail