



ADDRESS CHANGE FORM

How to use this form

This form should be used if you've moved and need to change your address, or if you are about to move and would like to change your address. It can also be used to request a temporary or seasonal address change or to update your e-mail address. When complete, please sign and mail to:

Sovereign Bank
Mail Code: RI1-EPV-0218
P.O. Box 831001
Boston, MA 02283

Required information is marked with an asterisk (*).

Account Holders

Account Holder 1

Account Holder 2†

*First Name _____
Middle Name _____
*Last Name _____

Old Mailing Address

*Address 1 _____
Address 2 _____
*City/Town _____ *State _____ *Zip Code _____
Home Phone _____ Work Phone _____

New Mailing Address

*Address 1 _____
Address 2 _____
*City/Town _____
*State _____
*Zip Code _____
*Contact Phone _____

Is this a temporary address? Yes No If yes, when should the previous address be reinstated? ____/____/20____

Would you like to update your **E-Mail Address**? Old _____ New _____

†If there are more than two account holders, please submit multiple forms.



ADDRESS CHANGE FORM, CONTINUED

Due to Patriot Act Requirements, if you have changed your address to a P.O. Box, we will also require your updated physical address. Please provide below.

New Physical Address

*Address 1 _____
Address 2 _____
*City/Town _____
*State _____
*Zip Code _____
*Contact Phone _____

Impacted Account Numbers

Please remember to include all applicable account numbers, including checking, savings, money market, CD, IRA, loan, line of credit, mortgage, and ATM Card/Visa® CheckCard.

Account Number _____
Account Number _____
Account Number _____
Account Number _____
Account Number _____
Account Number _____

Account Holder 1 Signature **X** _____ Print Name _____ Date _____
Account Holder 2 Signature **X** _____ Print Name _____ Date _____

†If there are more than two account holders, please submit multiple forms.