



Profile Update Request Form

Name: _____ Social Security/Tax ID #: _____

Address Changes

UPDATE MY ADDRESS: Address Change Type: Primary Mailing Seasonal

Seasonal Start Date: _____ Seasonal End Date: _____

New Address: _____ Apt/Ste/Unit #: _____

City: _____ State: _____ Zip Code: _____

New Email Address: _____ New Telephone: _____

Old Address: _____ Apt/Ste/Unit #: _____

City: _____ State: _____ Zip Code: _____

Old Email Address: _____ Old Telephone: _____

Security Phrase Changes

UPDATE MY SECURITY PHRASE:

Previous Security Phrase: _____ New Security Phrase: _____

Accounts

List below the account number(s) that the above changes should affect. Separate account numbers with a comma.

Name (Printed) _____ Signature _____ Date _____

Name (Printed) _____ Signature _____ Date _____

Return Instructions

Please return this completed application by using one of the following methods:

1. Upload and send to Customer Service via secure message in Online Banking as an attachment (Messages menu)
2. Contact Customer Service to receive a link to digitally sign this document via the email address we have for you on file
3. Send via regular mail to:

Happen Bank, N.A.
ATTN: Customer Service Department
PO Box 55063
Boston, MA 02205-8031

4. Provide to a Happen Bank representative in person at our Financial Center in Boston, MA

INTERNAL USE ONLY

Performed by: _____

Date: _____