

## SERVICE CHANGE REQUEST FORM

Please complete this form and email to [hdesk@ghl.com](mailto:hdesk@ghl.com)

Change Request Details	
Merchant Name:	
GHL Merchant ID:	
Acquiring Bank:	
Bank MID:	
Changes requested (You may tick more than 1 box):	
<input type="checkbox"/> Contact Person : <hr/> <input type="checkbox"/> Merchant Contact Number : <hr/> <input type="checkbox"/> Merchant Email Address : <hr/>	
<input type="checkbox"/> Business Address <hr/> <hr/>	
<input type="checkbox"/> Mailing Address <hr/> <hr/>	
<input type="checkbox"/> Bank Account Information (Please attach Bank Statement)	
i. Bank Name: _____ ii. Bank Account Name: _____ iii. Bank Account Number: _____ iv. Bank Branch Name: _____ <hr/>	
<input type="checkbox"/> Payhere - Resend Activation Link / Reset Password	
<input type="checkbox"/> Email address: _____ <input type="checkbox"/> Mobile Number: _____	
<input type="checkbox"/> Others <hr/> <hr/>	
Reason: _____ <hr/> <hr/>	
<b>Requested by:</b> (Authorized Person)     Name: Date:	<b>Company stamp:</b>     
For GHL Office Use	
<b>Approved by:</b>  Name: Date:	<b>Remarks:</b>     
<b>Made by:</b> (Maker)  Name: Date: Remarks:	<b>Checked by:</b> (Checker)  Name: Date: Remarks: