

Change of Merchant Portal

Swedbank Pay PL 1107 00101 HELSINKI

Merchant ID	Co.reg.no (in case of change of company a new agreement needs to be signed)
Change regarding (Specify the new data)	l J
The user's first and last name	
The user's e-mail address	
Documents by mail	
Wishes documents to be additionally sent by mail	
Changes apply from	
Other	
Signatures	
Date	
Authorised signatory*	
Name, printed	

*In the case of organisations, co-operative economic associations and similar, an official record must be attached that shows who is entitled to sign the agreement

A certify copy of ID document needs to be attached!

Swedbank Pay Support 020 746 9120



COPY OF ID DOCUMENT

Name of company (legal title)	Co. reg. no.	Merchant ID (to be entered by Swedbank Pay)
Space	e for copy of valid Finnish ID document (pa	assport)
Note! Photogra	aph, personal data and signature must	appear clearly.

This photocopied ID document must be certified by two (2) persons.

I hereby certify (witness) the authenticity of the above copy of the ID document.

Person 1	Person 2
Date	Date
Signature	Signature
Name, printed	Name, printed
Personal ID number	Personal ID number
Street address	Street address
Postal code and town	Postal code and town
Telephone no (including area code)	Telephone no (including area code)