

Customer Service Department:

Please replace my Suffolk OTB Money Card Account No. _____

PIN No. _____. I understand that I will be getting a new account number.

Name _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Social Security No.: _____

Please check the appropriate line below:

_____ Current Account Holder

_____ Winners Circle Member

Signature: _____ Date: _____

Download this application, completely fill out all requested information, and either:

- Bring it to your local Suffolk OTB Branch
- Fax it to (631) 853-1089
- Mail it to:
Suffolk OTB – Customer Service Dept.
5 Davids Drive
Hauppauge, NY 11788