

SWITCH KIT



Restructuring your financial future has never been **EASIER!**

1. Establish your new account at Flatwater Bank. Check out our account options, and we will assist you in opening the account that is right for you.

*New customers will need to provide two forms of ID. Example- Drivers License and Social Security card...

- 2. Fill out and sign the **DIRECT DEPOSIT** and **AUTOMATIC PAYMENT** forms. This will allow you to switch all automatics to your new account at Flatwater Bank.
- 3. Finally, transfer your account balance(s) to your new Flatwater Bank Account. This can be completed by either filling out the **FINANCIAL FUNDS TRANSFER** request form or by simply writing a check from your old bank to your new account at Flatwater Bank. *Be sure to leave enough to cover any outstanding checks on your old account.

This packet allows you to easily organize your information and bring it into Flatwater Bank. We will process the information then have you sign your signature cards and make your initial deposit. If you are not able to come in, we may be able to complete the process by mail.

*Please recognize it will take longer by mail.



Individual	Joint Account	Beneficiary:		
Name		SS#		DOB
Address		City, State, ZIP		Home Phone
Employer				Work Phone
Length with cur	rent employer (y	rs/mo)	Identification _	
-		rs/mo) Ex Date		
-	Issue Date			DOB
DL#	Issue Date	Ex Date		
DL#(Joint owner) Na	Issue Date	Ex Date SS#		DOB
DL# (Joint owner) Na Address Employer Length with cur	Issue Date ame	Ex Date SS#	State	DOB Home Phone Work Phone



CHECKLIST

The following checklist will help your switch to Flatwater Bank go smoothly.

Your new Flatwater Bank account #_____ Your new Flatwater Bank routing #<u>104901607</u>_____

Direct Deposits

Fill out a **Direct Deposit** form for each one needed.

- □ Payroll
- □ Retirement
- □ Social Security 1-800-772-1213 or <u>www.ssa.gov/deposit/how tosign.htm</u>
- □ Child Support
- □ Other_____

Automatic Payments

Fill out an Automatic Payment form for each one needed.

- □ Mortgage/Rent
- □ Auto Insurance
- □ Health Insurance
- □ Phone Service
- □ Cable TV
- □ Internet Service
- □ Utilities
- □ Other_____
- Other_____
- □ Other_____



DIRECT DEPOSIT

Fill in the information below and bring the form your Flatwater Bank account to you	he completed form along with a voided check ar company's payroll department.
(please print) Company Name	
Employee Name	
Address	
City St	ate Zip
Phone Number	
Social Security (last 4 digits) # _XXX-XX	Date of Birth
Flatwater Bank's Routing # <u>104901607</u>	
My Flatwater Bank Checking Account #	
I hereby authorize and request you to: Dep and begin depositing to the above account n	osit my pay each pay period, effective immediately, number at Flatwater Bank.
Additional Direct Deposit to:	
Checking / Savings – Account # (circle one)	Amount
Checking / Savings – Account # (circle one)	Amount
Signature of employee	Date
If you receive a Social Security or governme or switch a direct deposit is to call the numb	ent check, the easiest way to enroll in direct deposit per below:
For Social Security/SSI Checks: 1-800-772-	1213 (changes) 1-800-333-1795 (new set-up)
For Veterans Benefits: 1-800-827-1000	



FINANCIAL FUNDS TRANSFER

Financial Funds	Transfer Request
1. Customer Information	
Account Owner	SS#
Co-Owner	SS#
Address	
City, State, ZIP	
2. Transfer My Account FROM:	
Financial Institution	
Account #	Account type
Please send a check to:	
□ My address listed above	Please transfer \$
□ Flatwater Bank *	Please transfer the entire remaining balance
PO Box 81	and close my account.
Gothenburg, NE 69138	
*(Please make check payable to Flatwater Banl	x for benefit of
Acct#)
	nsfer from my existing account to my new account at t this request, please contact me at
Customer's Signature	Date
Co-Owner's Signature	Date



AUTOMATIC PAYMENT REQUEST

	Automatic Payment
Payee	
Address	
Phone	Account #
Name	Date
Signature	
by my original signature	to Flatwater Bank. Please consider this request, indicated e, as a formal order to forward my pending or future v account with Flatwater Bank, 900 Lake Ave, Gothenburg
Routing Number: <u>10490</u>	1607
New Account #:	
\Box Checking \Box Sa	ivings
	Automatic Payment
Payee	
Address	
	Account #
Name	Date
Signature	
by my original signature	to Flatwater Bank. Please consider this request, indicated e, as a formal order to forward my pending or future v account with Flatwater Bank, 900 Lake Ave, Gothenburg
Routing Number: <u>10490</u>	1607
New Account #:	