



Switch Checklist

To ensure a smooth transition, please take a moment to go over this checklist and make sure you've covered everything you need to begin your relationship with Premier Financial Credit Union.

Did you?

- Meet with a Member Relations Specialist and set up your new Premier Financial Credit Union account.

My Member Relations Specialist: _____

- Change your **direct deposits** to your new Premier Financial Credit Union account. (Payroll, Social Security, Government, Retirement, Investments)
- Change your **automatic payments** over to your new Premier Financial Credit Union account. (Mortgage, Auto Loan, Health Insurance, Life Insurance, Car Insurance, Credit Card, Utilities, TV, Phone, Online Services, Health Club, Investments & Annuities, Charitable Donations)
- Change your **automatic transfers** over to your new Premier Financial Credit accounts.
- Close your accounts at your former financial institution.

Welcome to Premier Financial Credit Union.



Request and Approval to Change My Automatic Transfer

Print and complete a copy of this form to notify any financial institutions or companies that you are authorizing your automatic transfers (ex: loan payment, insurance payment, transfers to brokerage accounts, transfers to savings accounts, etc.) to your new Premier Financial Credit Union account. This form is recommended for fixed dollar amount transfers.

You are currently making the following automatic transfer on my behalf:

\$ _____

From: _____
Name of Bank or Company Account #

To: _____
Name of Institution Account #

Schedule/Frequency: _____

Please use this letter as my authorization to switch the transfer to the below listed account at Premier Financial Credit Union.

Institution: Premier Financial Credit Union Routing #: 275980887

My account # at Premier Financial Credit Union: _____

All other aspects of the transfer should remain the same. Please make this change effective as of: _____

If you need further information to complete the change, I can be contacted

at: _____
Phone Number

Signature(s)

Date



Authorization to Change Direct Deposit / Automatic Deposits

Print and complete a copy of this form for each depositor with whom you have arranged for direct deposit (ex: Payroll, Social Security, Government, Retirement, Investments) to notify them that you are authorizing the direct deposit to be made to your new Premier Financial Credit Union account. Please allow sufficient time for change.

Please establish direct deposit into my new Premier Financial Credit Union (circle one) checking / savings / money management.

275980887

Premier Financial Credit Union's Routing Number

My New Premier Financial Credit Union Account Number

I have enclosed a deposit slip to verify my new Premier Financial Credit Union account number.

Signature(s)

Date

My (circle one) checking / savings / money market at the following financial institution has been closed:

Please print name of former financial institution

Former Routing Number

Former Account Number

Name(s) on account



Authorization to Change Automatic Payment / Draft

Complete this form to cancel automatic payments (ex: utilities, telephone, etc.) that you make from your former financial institution's account. Print as many copies of this form as you need and mail one to each of the companies that you have an automatic payment with before your next payment is due. Please allow sufficient time for change. This form is recommended for a variable dollar amount transfers.

I hereby authorize automatic payments from my new account at Premier Financial Credit Union.

Company to receive this form

My/our account number at this company

275980887

Premier Financial Credit Union's Routing Number

My New Premier Financial Credit Union Account Number

Signature(s)

Date

Daytime Phone Number

I have closed my (*circle one*) checking / savings / money market account at:

Please print name of former financial institution

Former ABA routing number

Former account number

Name on account



Authorization to Close

Complete this form and mail it to your former financial institution to notify them that you are closing your account and would like to receive a check for the remaining balance. Please allow time for direct deposits, automatic withdrawals or checks that may already be in process.

Print and complete a copy of this form for each account that you have at your existing financial institution.

Please close my: *(circle one)* checking / savings/ money market account at:

Please print name of former financial institution

Account number: _____

Name on account: _____

Secondary name on account: _____

Please send a check payable to me/us for the remaining balance in the above-described account directly to me/us at this address:

Signature(s)

Date