



SIMPLE SWITCH KIT



First United
Bank & Trust

Member FDIC

1-888-692-2654

[MyBank.com/switch](https://www.firstunited.com/switch)

Simple Switch Kit Checklist

Welcome to First United Bank & Trust! This Simple Switch Kit has been developed to provide you with the tools you need to make your transition to First United as quick and easy as possible.

Use this checklist as a guide to ensure all critical items have been switched to First United before you close your existing accounts at your previous financial institution.

- Make sure all checks have cleared your previous checking account.
- Make certain enough funds are available in your previous checking account to cover any automatic payments or checks that may yet need to be withdrawn.
- Send the Authorization to Change Direct Deposit form to your direct deposit vendors (payroll, social security, CD interest payment, etc...) to update your direct deposits.

Don't have direct deposit set up yet? Check with your employer or vendor to see if direct deposit of your funds is an option. If so, you can notify them using the Authorization Agreement for Direct Deposit form or by their preferred notification method.

- Send the Authorization to Change Automatic Payment/Transfer form to your vendors who automatically take payments from your checking account (utilities, insurance companies, loan payment, credit card payments, etc...)
- Send the Authorization to Close Account form to the financial institution that you are closing your account.

Helpful Hint: Some vendors may accept online or phone notification of your account change, check with your vendors for notification options.

Have questions about finalizing your switch to First United? Contact your local Community Office or our Customer Care Center at 1-888-692-2654.



Authorization Agreement for Direct Deposit

Please review and complete the following information. Return this form to your human resources office or the vendor you receive payments from regularly.

Section 1 – Direct Deposit Authorization

Name: _____ Address: _____
City: _____ State: _____ Zip: _____
Company Name: _____ Address: _____
City: _____ State: _____ Zip: _____

Section 2 – Deposit Instruction

Deposit the entire amount to checking account #: _____
 Deposit the entire amount to savings account #: _____
 Deposit \$ _____ amount to _____ account #: _____
And the remaining amount to _____ account #: _____

First United Bank & Trust
12892 Garrett Highway
Oakland, MD 21550
Transit/ABA# **052100987**

Section 3 – Signature

I hereby authorize:

- Above listed entity to initiate credit or debit entries, if necessary, to correct any credit entries made in error, to my checking or savings account at First United.
- First United to credit and/or debit entries to my account(s).
- This authorization is to remain in full force and effect until I send a written notice of change or cancellation.

Signature: _____ Date: _____



Authorization to Change Direct Deposit

To: _____ (Company/Vendor Name)

From: _____ (Name)

_____ (Address)

_____ (City, State, Zip)

_____ (Social Security Number)

RE: Change of Direct Deposit Routing

Please discontinue sending my automatic direct deposit to:

Checking account # _____ and/or

Savings account # _____ with _____
(Name of Financial Institution)

Please begin sending the same deposit to **First United Bank & Trust**:

Deposit the entire amount to checking account #: _____

Deposit the entire amount to savings account #: _____

Deposit \$ _____ amount to _____ account #: _____
(Checking/Savings)

And the remaining amount to _____ account #: _____
(Checking/Savings)

First United Bank & Trust

12892 Garrett Highway

Oakland, MD 21550

Transit/ABA# **052100987**

I hereby authorize:

- Above listed entity to initiate credit or debit entries, if necessary, to correct any credit entries made in error, to my checking or savings account at First United.
- First United to credit and/or debit entries to my account(s).
- This authorization is to remain in full force and effect until I send a written notice of change or cancellation.

Signature: _____ Date: _____



Authorization to Change Automatic Payment/Transfer

Please review and complete the following information. Return this form to any banks or vendors who automatically take payments from your checking or savings account (utilities, insurance companies, loan payments, credit card payments, etc...).

To: _____ (Company/Vendor Name)
From: _____ (Name)
_____ (Address)
_____ (City, State, Zip)
_____ (Company/Vendor Account Number)

RE: Change of Automatic Payments/Transfers

Please discontinue sending my automatic payment(s)/transfer(s) from:

Checking account # _____ and/or
Savings account # _____ with _____
(Name of Financial Institution)

Please begin using the following **First United Bank & Trust** account for my payment(s)/transfer(s):

- Checking account #: _____ or
 Savings account #: _____

First United Bank & Trust
12892 Garrett Highway
Oakland, MD 21550
Transit/ABA# **052100987**

All other aspects of the payment(s)/transfer(s) should remain the same. Please make the change effective as of: _____.

If you need additional information please contact me at _____.

Signature: _____ Date: _____



Authorization to Close Account

Please review and complete the following information. Return this form to your former financial institution to notify them that you are closing your account and would like to receive a check for any remaining balance. Please allow time for any outstanding checks, payments, or direct deposits that may already be in process.

Please close my account at: _____
Name of Financial Institution: _____
Account Number: _____
Name on Account: _____
Other Name(s) on Account: _____
Social Security Number/TIN: _____

Please send a check payable for any remaining balance in the above account to:

Name: _____
Address: _____
City, State, Zip: _____

Signature: _____ Date: _____



Online Bill Payment and Check Card Worksheet

Online Bill Payments: Use the form below to capture your current online banking bill payments that need to be transferred to your new First United Online Bill Payment solution. Before you cancel your current bill payment service, print your Payee Information and you Bill Payment history, so you have record of your previous payments.

Check Card (or Automatic Payment/Transfer): Use the form below to capture any check card or automatic payment/transfers that are currently paid automatically from your checking or savings account (utilities, insurance companies, loan payments, credit card payments, etc...).

You may use the Authorization to Change Automatic Payment/Transfer form to notify these vendors of your account change or contact the company directly via their website, telephone or mail to find out how to update your payment information.

Payee Name	Payee Address	Payee Phone #	Account #	Payment Date	Payment Amount	Set up Complete

