



Personal Switch Kit Instructions

It is our goal at Liberty Bay Bank to make it as simple as possible for you to transfer over your personal accounts. To make it convenient, we have compiled all of the required forms and included them in this easy switch kit. Simply review these forms and complete them as requested. Then follow the steps detailed below:

Step 1 - Complete Client Profile Form

Complete the attached Client Profile Form and bring it with you to the Bank along with your driver's license, trust documents (if applicable), and power of attorney (if applicable).

Step 2 - Visit your Liberty Bay Bank Branch and open your new accounts

A Professional Banker will be available to review your forms and assist you in selecting the accounts that are right for you. Your Professional Banker will also assist you in setting up Liberty On-Line Banking and Bill Pay.

Step 3 - Change your Direct Deposits

Complete the enclosed Direct Deposit Change Form and provide copies to your Employer, Pension Plan Administrator, and/or Social Security Administration Office.

Step 4 - Transfer your Automatic Payments

Complete the enclosed Automatic Payment Transfer Form. Mail a copy of this form, along with a cancelled check from your new Liberty Bay Bank account, to every business and merchant who debits your account for payment.

Step 5 - Close your Old Account

Complete the attached Account Closure Request Form. Make sure that sufficient funds remain in the account to cover any outstanding transactions. Once you are certain that there are no outstanding items, mail this form to your existing Bank instructing them to close the account and send a check for the remaining balance.



Direct Deposit Change Form

Please complete this form as indicated and provide copies to your employer, Pension Plan Administrator, and/or Social Security Administration.

Personal Information:

Name: _____

Street Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Social Security #: _____ Driver's License #: _____

Type of Deposit:

Name of Originator: _____

Address: _____

Account #: _____

- Payroll Retirement/Annuity Dividend
 Social Security Other: _____

Liberty Bank Account Information:

Deposit to: Checking Savings

Liberty Bay Bank Acct #: _____

Liberty Bay Bank Routing #: **125108984**

Name on the Account: _____

Authorization:

I authorize (name of depositor) _____ and Liberty Bay Bank to automatically deposit my check into the account listed above. This authorization will remain in effect until I have filed a new authorization, or until this authorization is revoked.

Signature

Date

Date: _____

To: _____

To whom it may concern:

Please close my account with your financial institution. To my knowledge there are no outstanding checks that need to clear against the balance and all automatic deposits and withdrawals have been stopped.

The following listed account(s) need to be closed:

I authorize you to release the remaining funds in my existing account in the form of a cashier's check made payable to: _____

And release the check to _____

The final statement can be mailed to the address on file: _____.

Please contact me at (____)_____ if you have questions regarding this request.

Thank you,

Authorized Signature

Printed Name