

# EZ Switch Kit



Welcome to First National Bank Minnesota!

Our goal is to provide the value, service and expertise you need to meet all of your financial needs. We can make the transition from a previous financial institution to First National Bank Minnesota a smooth process.

## CHECKLIST

### 1. OPEN YOUR NEW CHECKING ACCOUNT

One of our Universal Bankers will help you decide:

- which checking account will BEST meet your individual needs
- if you could benefit from having a ATM/debit card
- if you would like to take advantage of FREE internet banking with FREE e-statements, and FREE telephone banking
- if you would like to sign up for Online Banking

### 2. SWITCH OVER YOUR AUTOMATIC TRANSACTIONS

2a. Use the [Direct Deposits: Notification of Change of Financial Institution form \(2a\)](#) to notify your employer or anyone who automatically makes direct deposits to your checking account.

Common direct deposits include:

- |                                    |                                               |                                                             |
|------------------------------------|-----------------------------------------------|-------------------------------------------------------------|
| <input type="checkbox"/> employers | <input type="checkbox"/> investment companies | <input type="checkbox"/> credit card companies              |
| <input type="checkbox"/> rent      | <input type="checkbox"/> income tax refunds   | <input type="checkbox"/> government agencies (see page 2a*) |

It is helpful to review your last three months of bank statements to be sure you have included all direct depositors.

2b. Use the [Withdrawals: Notification of Change of Financial Institution form \(2b\)](#) for any automatic withdrawals you have come out of your checking account. Common withdrawals include:

- |                                            |                                                   |                                            |                                        |
|--------------------------------------------|---------------------------------------------------|--------------------------------------------|----------------------------------------|
| <input type="checkbox"/> investments       | <input type="checkbox"/> charitable contributions | <input type="checkbox"/> phone bills       | <input type="checkbox"/> gym           |
| <input type="checkbox"/> loan payments     | <input type="checkbox"/> insurance premiums       | <input type="checkbox"/> cable bills       | <input type="checkbox"/> utility bills |
| <input type="checkbox"/> Internet services | <input type="checkbox"/> credit card payments     | <input type="checkbox"/> real estate taxes | <input type="checkbox"/> T.V. service  |

Again, review a minimum of your last three months of bank statements to be sure you have notified anyone that directly deposits or withdraws from your account.

### 3. CLOSE YOUR PREVIOUS ACCOUNT

Once all of your pre-authorized debits and checks you have written clear your previous account, close the account. This can be done in person or by using the [Authorization to Close Account Form \(3\)](#).

# Direct Deposits: Notification of Change of Financial Institution

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employer/Depositor's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

I have opened a new deposit account at First National Bank Minnesota. Please use this new account for any future deposits effective as of this date \_\_\_\_\_.

New Financial Institution:

First National Bank Minnesota

Routing Number: 091901338

Checking Account Number: \_\_\_\_\_

Savings Account Number: \_\_\_\_\_

If you have any questions about this request, please contact me during the day/evening (circle one) at \_\_\_\_\_ (phone number).

Thank you.

Sincerely,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\*Direct deposits from government and some private sources may require a separate authorization form. Please check with a Universal Banker to see if your deposits require a different form.

Social Security Customers, please call the Social Security Administration at 1-800-772-1213. For VA benefits, please call the Department of Veterans' Affairs at 1-877-838-2778 for further information.



# Withdrawals: Notification of Change of Financial Institution

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Company Making Automatic Withdrawal

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

To Whom It May Concern:

You are currently automatically withdrawing \$\_\_\_\_\_ (amount)  
for my \_\_\_\_\_ (what payment/deposit is for)  
from \_\_\_\_\_ (account or other identifying number),  
on \_\_\_\_\_ (recurring date)  
from the following account: Old Bank: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

I have opened a new deposit account at First National Bank Minnesota. Please use this new account for any future withdrawals effective as of this date: \_\_\_\_\_. I have stapled a voided check from my new account to this page.

New Account Information: First National Bank Minnesota

Routing Number: 091901338

Checking Account Number: \_\_\_\_\_

Savings Account Number: \_\_\_\_\_

If you have any questions about this request, please contact me during the day/evening (circle one) at \_\_\_\_\_ (phone number).

Thank you.

Sincerely,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip



## Authorization to Close Account

\_\_\_\_\_  
Date

\_\_\_\_\_  
Bank's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

To Whom It May Concern:

Please close my account \_\_\_\_\_(account number).

Please be advised that, to the best of my knowledge, all checks and authorized debits have cleared the above referenced account. I wish to close this account and have the remaining balance sent to me at the address below.

If you have any questions about this request, please contact me during the day/evening (circle one) at \_\_\_\_\_ (phone number).

Thank you.

Sincerely,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

