

Stop Using Your Old Account...

...but don't close it yet!

Begin making a list of your direct deposits, automatic payments and withdrawals, outstanding checks, and anything else that goes in or out of your account. This form should help you consider some of the possible account activities initiated through your old account.

Direct Deposits	Company	Account Number	Amount	Date of Payment
Employee Payroll				
Investment Incomes				
Pension/Retirement Plans				
Social Security				
Other				

Automatic Payments	Company	Account Number	Amount	Date of Payment
Credit Cards				
Education Expenses				
Insurance				
IRA/Retirement				
Loans				
Membership Dues				
Mortgage/Rent				
TV/Internet				
Utilities:				
• Gas/Oil				
• Electric				
• Water				
• Disposal Services				
Other				



Direct Deposit Change Form

To:

Company Name

Company address

City

State

Zip

This letter is to inform you that I am switching banks and will be closing my old account. Included in this letter is everything you will need to update your records so you can continue to deposit my funds into my account based on our previous agreement.

Information from my old account:

Financial Institution: _____

Routing Number: _____

Account Number: _____

Please stop making deposits into this account effective: _____
(insert date)

Please redirect to: JSSB Routing Number: 031306993

Account Number: _____

Type of Account: _____

If you have any questions about this request, please contact me at:

Day: (____) _____ - _____ Evening: (____) _____ - _____

Customer Signature

Date

Print Name

City

State

Zip

Other information your employer may need (SSN, Employee ID#, etc.)

For each deposit transaction, please fill out a separate form.

Please Note:
Attach voided check to form



Member
FDIC

Auto Payment/Withdrawal Change Form

To:

Company Name

Company address

City

State

Zip

This letter is to inform you that I am switching banks and will be closing my old account. Included in this letter is everything you will need to update your records so you can continue to make withdrawals from my account.

Information from my old account:

Financial Institution: _____

Routing Number: _____

Account Number: _____

Please stop making withdrawals from this account effective: _____
(insert date)

Please redirect to: JSSB Routing Number: 031306993

Account Number: _____

Type of Account: _____

If you have any questions about this request, please contact me at:

Day: (____) _____ - _____ Evening: (____) _____ - _____

Customer Signature

Date

Print Name

City

State

Zip

For each automatic payment or withdrawal, please fill out a separate form.

Examples of a payment or withdrawal you may have:

- Loan Payment
- Utility Payment
- Daycare Fees
- Transfer to Investment Account

JSSB
Jersey Shore State Bank
www.jssb.com



Member
FDIC

Close Account Request Form

To:

Bank's Name

Address

City

State

Zip

This letter is to inform you that I will be closing my old account(s) with you. Included in this letter is everything you will need to close my current account(s) and where to send the proceeds.

Accounts to be closed:

Please close the following account(s) effective: _____
(insert date of closure)

Account Number: _____ Checking/Savings/IMM

Account Number: _____ Checking/Savings/IMM

Account Number: _____ Checking/Savings/IMM

Account Number: _____ Checking/Savings/IMM

Please mail a check for the account balance to my address below.

If you have any questions about this request, please feel free to contact me at:

Day: (____) _____ - _____ Evening: (____) _____ - _____

Thank you,

Customer Signature

Date

Print Name

City

State

Zip

Account Co-Owner's Signature, if applicable

Date

Print Name (Co-Owner)

Date

JSSB is not responsible for the closing of another bank's accounts.

To close your old accounts, deliver this form to your old bank.

Please leave your old account(s) open until all outstanding checks, automatic payments and withdrawals, and deposits have cleared.

