

# EMPOWERING YOU

to bank how you want.



**SWITCH KIT**

# GETTING STARTED

Making the switch to better banking in 3 simple steps!

1

## **Open your new account**

Join the UFirst family by filling out our online form or scheduling an appointment to open in person. Scan here to get started...



2

## **Re-route your direct deposits & automatic withdrawals**

If you have direct deposit and/or automatic payments, use the forms provided in this packet to track and switch them to your new UFirst account.

3

## **Close your old account**

Now that all of the hard work is done, simply fill out the enclosed form to close your old account. The form will direct any remaining balance to be transferred to your new UFirst account!



# DIRECT DEPOSIT

## Change request form

Complete this form and provide it to your employer to move your direct deposit from your old financial institution to UFirst FCU. Please note, some employers may have their own forms or policies to follow in addition to this form.

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Date

I, \_\_\_\_\_ request to stop direct deposit from the following account:  
Employee name

\_\_\_\_\_  
Financial Institution

\_\_\_\_\_  
Account #

\_\_\_\_\_  
Routing #

Account type: ☐ Checking ☐ Savings

I, \_\_\_\_\_ request to start direct deposit to the following account:  
Employee name

**UFirst Federal Credit Union**

\_\_\_\_\_  
Financial Institution

\_\_\_\_\_  
Account #

**221379251**

\_\_\_\_\_  
Routing #

Account type: ☐ Checking ☐ Savings  
(Circle one)

\_\_\_\_\_  
Name (Printed)

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Home address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date



# AUTOMATIC PAYMENT

## Authorization for automatic payment transfer

Complete this form and provide it to any merchant whom you currently have automatic payments with. See attached checklist of possible merchants. Please note, some merchants may offer an easier option to switch payment methods in place of this form.

\_\_\_\_\_  
*Merchant company or financial institution payment is going to*

You are currently withdrawing \$ \_\_\_\_\_ for the payment of \_\_\_\_\_  
*Amount Type of payment*  
on the \_\_\_\_\_ of each month, for the account listed below  
*Date*

I, \_\_\_\_\_ request a stop payment from the following accounts  
*Account Holder's Name*

\_\_\_\_\_  
*Financial Institution*

\_\_\_\_\_  
*Card or Account #*

\_\_\_\_\_  
*ABA/Routing #*

Account type: ☐ Checking ☐ Savings  
*(Circle one)*

I, \_\_\_\_\_ request to start direct deposit to the following account:  
*Employee name*

**UFirst Federal Credit Union**

\_\_\_\_\_  
*Financial Institution*

\_\_\_\_\_  
*Account #*

**221379251**

\_\_\_\_\_  
*Routing #*

Account type: ☐ Checking ☐ Savings  
*(Circle one)*

**Please contact me with any further questions:**

\_\_\_\_\_  
*Name (Printed)*

\_\_\_\_\_  
*Email address*

\_\_\_\_\_  
*Phone #*

\_\_\_\_\_  
*Home address*

\_\_\_\_\_  
*City/State/Zip*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*



# CHECKLIST

## For automatic withdrawals

It can be hard to remember all of the payments that come out of your account regularly, so this list is to help you get started! This list isn't complete, so we suggest checking your bank statements just in case.

- |   |   |
|---|---|
| <input type="checkbox"/> Mortgage/Rent  | <input type="checkbox"/> Streaming services (HULU, Spotify, etc.) |
| <input type="checkbox"/> Auto Loans     | <input type="checkbox"/> Gym Memberships                          |
| <input type="checkbox"/> Utilities      | <input type="checkbox"/> Charitable Giving                        |
| <input type="checkbox"/> Insurance      | <input type="checkbox"/> Investments                              |
| <input type="checkbox"/> Cable/Internet | <input type="checkbox"/> Credit Card Payments                     |
| <input type="checkbox"/> Child Care     | <input type="checkbox"/> Auto ship orders                         |

Use the chart below to easily track each automatic withdrawal/payment and mark off when you have updated your payment method by checking the “complete” column. This will help make sure nothing is missed!

Due Date	Type of Payment	Frequency	Amount	Complete



# ACCOUNT CLOSURE

## Request form

Complete and provide this form to the financial institution where you will be closing your account. ***Make sure all automatic payments have been completed and all checks have cleared to ensure you have sufficient funds.***

I, \_\_\_\_\_ request to close the following account at \_\_\_\_\_.  
*Member's name* *Financial Institution*

I am requesting the closure of my account \_\_\_\_\_. Please forward the  
*Account #*  
remaining funds to my UFirst FCU account at the address listed below.

**UFirst FCU**  
**274 Rugar Street**  
**Plattsburgh, NY 12901**

I, \_\_\_\_\_ request to move all remaining funds to the following account:  
*Member's name*

**UFirst Federal Credit Union**

\_\_\_\_\_  
*Financial Institution*

\_\_\_\_\_  
*Account #*

**221379251**

\_\_\_\_\_  
*Routing #*

Account type:    *Checking*    *Savings*  
(Circle one)

\_\_\_\_\_  
*Name (Printed)*

\_\_\_\_\_  
*Joint Account Owners Name (Printed)*

\_\_\_\_\_  
*Phone #*

\_\_\_\_\_  
*Home address*

\_\_\_\_\_  
*City/State/Zip*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Joint Account Owner's Signature (If applicable)*

