

# SWITCH KIT INSTRUCTIONS

STEP 1

**Open your new checking account** with Century Savings Bank

STEP 2

**Stop using your old checking account** – but keep it open until your Direct Deposit and Automatic Payments take effect and all outstanding balances have cleared.

STEP 3

**Set up Direct Deposit:**

- Complete Century's Direct Deposit Form. Additional copies are available on [centurysb.com](http://centurysb.com).
- Submit the form to your employer's payroll department.

STEP 4

**Switch your automatic payments:**

- Complete Century's Automatic Payment Change Form for each of your automatic payments.

STEP 5

**Close your old checking and savings account(s) and transfer balance(s)** to your new Century Account once you ensure all of your outstanding checks/transactions have cleared.



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# SWITCH KIT CHECKLIST

For your convenience, we've assembled a list of common direct deposit and automatic payment items, along with a few helpful websites and phone numbers, to assist in making your switch to Century Savings Bank even easier.

## COMMON DIRECT DEPOSIT ITEMS

- |   |  |
|---|--|
| <input type="checkbox"/> Employee Payroll   | <input type="checkbox"/> Pension(s)/Retirement |
| <input type="checkbox"/> Investment Incomes | <input type="checkbox"/> Social Security       |

## COMMON AUTOMATIC PAYMENTS

- |   |   |
|---|---|
| <input type="checkbox"/> Auto Loans           | <input type="checkbox"/> Gas/Oil                        |
| <input type="checkbox"/> Cable/TV             | <input type="checkbox"/> Gym/Health Club                |
| <input type="checkbox"/> Cell Phone/Telephone | <input type="checkbox"/> Insurance: Home/Car /Pet/Other |
| <input type="checkbox"/> Charities            | <input type="checkbox"/> Internet Provider              |
| <input type="checkbox"/> Credit Cards         | <input type="checkbox"/> Investments                    |
| <input type="checkbox"/> Daycare              | <input type="checkbox"/> IRA/Retirement                 |
| <input type="checkbox"/> Electric             | <input type="checkbox"/> Mortgage/Rent                  |
| <input type="checkbox"/> Garbage              | <input type="checkbox"/> Water/Sewer                    |

## HELPFUL PHONE NUMBERS AND WEBSITES

- **Department of Veteran Affairs:** 1.877.838.2778 or 1.800.827.1000; [www.va.gov](http://www.va.gov)
- **Office of Personnel Management:** 1.888.767.6738; [www.opm.gov](http://www.opm.gov)
- **Railroad Retirement Board:** 1.877.772.5772; [www.rrb.gov](http://www.rrb.gov)
- **Social Security Administration:** 1.800.772.1213; [www.ssa.gov](http://www.ssa.gov)

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# DIRECT DEPOSIT

## WHY DIRECT DEPOSIT?

**It's Fast and Convenient.**

**It's Safe and Secure.**

**It Saves Time..and Gas!**

- Your check is automatically deposited into your account.
- Your money is available in your account on payday.
- You eliminate a trip to the bank.
- There's no possibility of lost or misplaced checks.

### For Payroll Checks:

1. Complete this application and give it to your employer's payroll department.
2. Include a voided check so your employer can confirm your account and routing/transit numbers.
3. And that's it! Your employer does the rest!



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## DIRECT DEPOSIT APPLICATION

**Take this completed form to your employer's payroll dept. to request direct deposit to your Century account.**

Customer Name

Address

City

State

Zip

**Please have \_\_\_\_\_%\* of my payroll check automatically deposited into the following Century Savings account:**

Account Number

**231270366**

Century Savings Bank ABA/Routing #

Checking

Savings

I authorize \_\_\_\_\_

Name of Business

and Century Savings Bank to automatically deposit my payroll check into my account listed above. This authorization will remain in effect until I give written notification of cancellation.

Customer Signature

Date

\* Assumes 100% if percentage left blank.

**ATTACH VOIDED CHECK**

# AUTOMATIC PAYMENT CHANGE FORM

1. Fill out one Automatic Payment Change Form for each automatic payment you currently have scheduled.
2. Send the completed form to each company with whom you currently have an automatic payment scheduled.
3. Include a voided check so the company can confirm your new account and routing/transit numbers.

Payee Name

Account Number (account # with payee)

Please redirect my automatic payment for the above account number to my new bank account below.

**Account type:**  Checking  Savings      **Effective:**  Immediately  Beginning \_\_\_\_/\_\_\_\_/\_\_\_\_

**My New Century Savings Bank Account Information:**

**231270366**

Century Savings Bank ABA/Routing Number

New Century Savings Bank Account Number

If you have questions, please contact me at: \_\_\_\_\_

Signature

Co-Signer Name (if applicable)

Printed Name

Date



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**ATTACH VOIDED CHECK**

# AUTOMATIC PAYMENT CHANGE FORM

1. Fill out one Automatic Payment Change Form for each automatic payment you currently have scheduled.
2. Send the completed form to each company with whom you currently have an automatic payment scheduled.
3. Include a voided check so the company can confirm your new account and routing/transit numbers.

Payee Name

Account Number (account # with payee)

Please redirect my automatic payment for the above account number to my new bank account below.

**Account type:**  Checking  Savings      **Effective:**  Immediately  Beginning \_\_\_\_/\_\_\_\_/\_\_\_\_

**My New Century Savings Bank Account Information:**

**231270366**

Century Savings Bank ABA/Routing Number

New Century Savings Bank Account Number

If you have questions, please contact me at: \_\_\_\_\_

Signature

Co-Signer Name (if applicable)

Printed Name

Date



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**ATTACH VOIDED CHECK**

# ACCOUNT CLOSING FORM

**To Whom It May Concern:**

**Please close the following bank account(s):**

- Checking
- Savings

\_\_\_\_\_  
Name on Account

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

- Checking
- Savings

\_\_\_\_\_  
Name on Account

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

All remaining balances should be sent to me at the following address:

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

If you have questions, please contact me at: \_\_\_\_\_

**Thank You.**

\_\_\_\_\_  
Signature of Account Holder

\_\_\_\_\_  
Co-Signer Signature (if applicable)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date



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