Getting Started

Making the switch to better banking today!

You can make the move to United Bank in three easy steps. Everything you'll need is provided in this handy Switch Kit. We can't wait to welcome you to United Bank, where you'll enjoy a better experience for all your banking needs!

Open your new account.

Apply online in minutes or visit your local branch to open your new United Bank account(s).

Switch your direct deposits and automatic withdrawals.

If you have any automatic transactions, use the provided forms to seamlessly switch them to United Bank.

Close your old account.

Now you're ready to switch. Simply fill out the provided form to close your old account. Any remaining account balance will be transferred to United Bank.





Direct Deposit Authorization

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize your employer, retirement and pension funds, or any other agency to deposit your payment directly into your United Bank account. Use one form for each direct deposit.

Notification of Direct Deposit Authorization Change					ct Deposit Checklist:
Company or Employer:					his list to remember all direct deposits you need
Address:					nsfer. These are the most non direct deposits.
City, State, Zip:					Payroll
Phone Number:				_	Investments
Employee ID:					Retirement Plans
(if applicable)					Social Security
Effective immediately, plea	ase deposit the net amou	nt of my check t	o my United Bank		
account. I authorize (name	of depositor)				
to automatically deposit fu	nds into the account belo	ow. This authoriz	ation shall remain in		
place until I have submitte	d a new authorization, or	r until this autho	rization is changed or		
revoked by me in writing.					
Place an X next to your desir	red option.				
Net amount to	United Bank CHECKING	G			
Account #		Routing #	282974161		
Net amount to	United Bank SAVINGS				
Account #		Routing #	282974161		
Signature:		1	Date:		
Name:					
Address:					
City, State, Zip:					
Phone Number:					





Automatic Withdrawal Authorization

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize a change to any automatic payment, deductions, or withdrawals from your account. Use one form for each automatic withdrawal. Or, many companies and agencies make it easy to change your account on record online on their website.

Notification of V	Automatic Withdrawal Checklist:		
Name of Company:			Use this list to remember all your
Account Number:			automatic payments you need to
Payment Amount:			transfer. These are some of the most commonly used automatic payments.
Address:			Home Mortgage
City, State, Zip:			Auto Loans
Phone Number:			Utilities
Please cancel all automatic withdrawals from my old institution:			Insurance
Financial Institution:			Cable/Internet
Account #	Bank Routing	ŧ	Gym/Club Memberships Credit Cards
Please make all future automatic withdrawals from my new institution:			Investments
Financial Institution:	United Bank		Subscriptions
Account #	Bank Routing	# 282974161	Charity Donations
	nain in effect until I have submitted to you a me in writing that this authorization has bee		

Signature:	Date:
Name:	
Address:	
City, State, Zip:	
Phone Number:	

Member



Account Closure Authorization

United Bank

You can authorize your remaining balance to be deposited automatically to your new United Bank account(s) or paid by a check forwarded to your mailing address.

Use this form to close your account(s) at your former financial institution. Be sure to verify any outstanding items have cleared your old account.

Notification of A	Congratulations!			
To Whom It May Concerr	n:	You had to sign your name a few timesbut submitting these forms		
Financial Institution:		completes your switch to a truly better banking experience. We can't wait to show you the difference a local partner makes.		
Address:				
City, State, Zip:		Welcome to United Bank!		
Please close my account	:			
Account Number:	Primary Owner:			
Address:				
City, State, Zip:				
Please send the remaining Place an X next to your desire Please deposi Account #				
Please forward	d me a check to my address listed below.			
Primary Signature:	Date:			
Joint Signature:				
Name:				
Address:				
City, State, Zip:				
Phone Number:				

