

Making the switch to better banking today!

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

1

Open your new account.

Visit your local branch to open your new The Peoples Bank account(s).

2

Switch your direct deposits and automatic withdrawals.

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

3

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 The Peoples Bank.

SWITCH KIT

Direct Deposit Authorization

You can use your keyboard to fill out this form 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 The Peoples Bank. Use one form for each direct deposit.

Notification of Direct Deposit Authorization Change

Company or Employer:

Address:

City, State, Zip:

Phone Number:

Employee ID:
(if applicable)

Effective immediately, please deposit the net amount of my check to my The Peoples Bank account. I authorize (name of depositor) to automatically deposit funds into the account below. This authorization shall remain in place until I have submitted a new authorization, or until this authorization is changed or revoked by me in writing.

Place an X next to your desired option.

Net amount to The Peoples Bank CHECKING
Account # Routing #

Net amount to The Peoples Bank SAVINGS
Account # Routing #

Signature: Date:

Name:

Address:

City, State, Zip:

Phone Number:

Direct Deposit Checklist:

Use this list to remember all your direct deposits you need to transfer. These are the most common direct deposits.

- Payroll
- Investments
- Retirement Plans
- Social Security



SWITCH KIT

Automatic Withdrawal Authorization

You can use your keyboard to fill out this form, 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 Withdrawal Authorization Change

Name of Company:

Account Number:

Payment Amount:

Address:

City, State, Zip:

Phone Number:

Please **change** my automatic withdrawal from the following account:

Financial Institution:

Account # Bank Routing #

Please make all **future** automatic withdrawals from the following account:

Financial Institution: **The Peoples Bank**

Account # Bank Routing # **053207533**

Thank you very much.

This authorization will remain in effect until I have submitted to you a new authorization, or until you have been notified by me in writing that this authorization has been changed or revoked.

Signature: Date:

Name:

Address:

City, State, Zip:

Phone Number:

Automatic Withdrawal Checklist:

Use this list to remember all your automatic payments you need to transfer. These are some of the most commonly used automatic payments.

- Home Mortgage
- Auto Loans
- Utilities
- Insurance
- Cable/Internet
- Gym/Club Memberships
- Credit Cards
- Investments
- Subscriptions
- Charity Donations

SWITCH KIT

Account Closure Authorization

You can authorize your remaining balance to be deposited automatically to your new The Peoples 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 Account Closure Authorization

To Whom It May Concern:

Financial Institution:
Address:
City, State, Zip:

Please close my account:

Account Number: Primary Owner:
Address:
City, State, Zip:

Please send the remaining balance to:

Place an X next to your desired option.

Please deposit directly to my new account at The Peoples Bank.
Account # Routing #

Please forward me a check to my address listed below.

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

Congratulations!

You had to sign your name a few times...but submitting these forms completes your switch to a truly better banking experience. We can't wait to show you the difference a local partner makes.

Welcome to The Peoples Bank!

Customer Account Application

Oct-15

Each item requires a response.

Name: (Last, First, Middle)

Physical Address:	City:	State:	Zip:
Mailing Address:	City:	State:	Zip:
How long at present address:	Primary Phone:	Business Phone:	Cell or Alternate:
Previous Physical Address (if less than three years):	City:	State:	Zip:
Social Security No.:	Email Address:		
U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No	If "NO" please indicate resident status:		Mother's Maiden Name:
Driver's License No.:	State of Issue:	Date of Birth:	City of Birth:
Have you ever been the victim of Identity Theft? <input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes", please provide details including date and actions taken:		
Employer:	Employment Address:	Length of Employment:	

If Self-employed, please provide details of your business:

For instances when we may need to verify your identity, please provide the following:

Free-Form Security Question: (i.e. "Favorite Color" or "Favorite Number")	Free-Form Security Answer:
Name and address of someone who will always know your location:	Their Phone:

What types of banking services may we help you with?

<input type="checkbox"/> Checking Account and Related Products and Services	<input type="checkbox"/> Savings	<input type="checkbox"/> Money Market
<input type="checkbox"/> Internet Banking	<input type="checkbox"/> Certificate of Deposit	<input type="checkbox"/> Safe Deposit Box
<input type="checkbox"/> Individual Retirement Accounts	<input type="checkbox"/> Health Savings	<input type="checkbox"/> Loans <input type="checkbox"/> Other

Applicant certifies that the above statements are submitted for the purpose of obtaining an account with The Peoples Bank and are true and correct. *Our bank complies with Section 326 of the USA PATRIOT Act. This law mandates that we verify certain information about you while processing your account application.* Applicant expressly authorizes Bank or Service Center to obtain information from others, including Credit Bureau Reports, concerning any of the foregoing statements and authorizes them to release such information. Applicant also acknowledges all Federal laws including the prohibition of processing restricted transactions through the account or relationship without proper license and authority. (i.e. Federal Reserve Regulation GG: Internet Gambling) Any changes in your legal authority must be submitted to us in writing.

Applicant Signature

Date

For Bank Use:

Name:	TIN:		
Date Application Received:	PORT:		
<input type="checkbox"/> Photocopy of ALL Identification Attached. <input type="checkbox"/> Risk Based Pricing Notice			
<input type="checkbox"/> CIP exceptions: (explain) <input type="checkbox"/> See Loan File <input type="checkbox"/> Performed Navigator OFAC <input type="checkbox"/> SSN Verified by Equifax <input type="checkbox"/> Withdrawn (explain)			
Sec. Broker/Dealer 011 <input type="checkbox"/>	MSB 111 <input type="checkbox"/>	PSP 211 <input type="checkbox"/>	Non-US Citizen 311 <input type="checkbox"/>
Charity 411 <input type="checkbox"/>	L 511 <input type="checkbox"/>	Cash Intensive Bus. 611 <input type="checkbox"/>	M 711 <input type="checkbox"/>
		Dealer Coin/Metal 811 <input type="checkbox"/>	H 911 <input type="checkbox"/>
Resp. Code / Name:			