

ALLIANT BANK'S ACCOUNT SWITCH KIT

**Important: Make sure to keep this sensitive account information secure. If printed, consider shredding once no longer needed. Additionally, exercise caution if transmitting documentation via email as it may not be a secure form of communication.*

1

Open your new Alliant Bank account

Apply online or visit any of our convenient locations and a dedicated banking specialist will happily assist you in establishing your new account with us.

2

Get organized

Use our hassle-free switch kit to organize the transactions that will be switched to your new Alliant Bank account. Start with the Transaction Checklist.

3

Transfer your direct deposits

Send **Form 1: Authorization to Change Direct Deposit** to your employer and other sources so your funds can be automatically deposited to your account. If you have Direct Deposits going elsewhere, you can also use this form to switch them to your new account.

4

Update your automatic payments

Send **Form 2: Authorization to Change Automatic Payment** to each of your creditors to switch any automatic payments so they'll come out of your new Alliant Bank account.

5

Close your old account

Use **Form 3: Please Close My Account** to notify your previous financial institution to close your account and let them know how to disburse any of your remaining funds. Make sure all your checks and debits have cleared BEFORE you close your old account.

If you have any questions or concerns during this process, please do not hesitate to contact us:

- Call or stop into your local Alliant Bank branch.
- Call us at 1-844-300-2003 to speak with one of our friendly banking specialists.



www.alliantbank.com

TRANSACTION CHECKLIST

***Helpful Tip:** For reference, gather your most recent statement from your old financial institution. You may even want a couple months worth. If applicable, include statements/information for utility payments, loan payments, health club memberships, etc. you have set up with your old account.

DIRECT DEPOSITS: List all direct deposits to your account(s).

Deposit Type	Company/ Institution Name	Account Number	Amount	Date
Employer Payroll				
Social Security				
Pension/Retirement				
Investment/Brokerage				

AUTOMATIC PAYMENTS/TRANSFERS: List all withdrawals from your account(s).

Withdrawal Type	Company/ Institution Name	Account Number	Amount	Date
Home/Auto Insurance				
Life Insurance				
Gas/Electric				
Phone				
Water				
TV/Internet				
Mortgage				
Credit Card				

Former Account Activity Tracking

You will want to keep track of the activity on your old account. Make sure that all checks, deposits, automatic payments, debit card transactions and ATM withdrawals have cleared before closing the account.



AUTHORIZATION TO CHANGE DIRECT DEPOSIT

Please deposit my check(s) directly into my new account as indicated below.



DIRECT DEPOSIT ACCOUNT INFORMATION

Company Name

Company Address, City, State, Zip



TYPE OF DEPOSIT

☐ Employee Payroll

☐ Social Security

☐ V.A. Compensation or Pension

☐ Supplemental Security Income

☐ Civil Service Retirement

☐ Pension

☐ Other _____



CUSTOMER INFORMATION

Name

Phone Number

Day
Evening

Address, City, State, Zip

Employee or Social Security Number



PREVIOUS ACCOUNT INFORMATION

☐ Checking Account

☐ Savings Account

Previous Financial Institution Name

Routing #

Previous Account #



NEW ACCOUNT INFORMATION

☐ Checking Account

☐ Savings Account

Alliant Bank

New Financial Institution Name

081506390

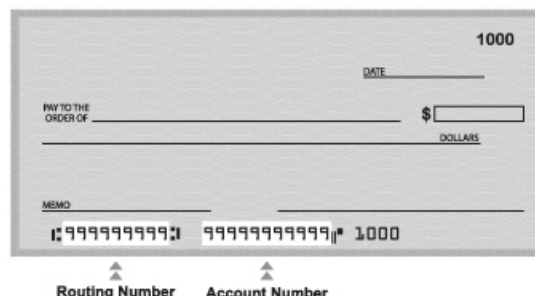
Routing #

New Account #

Effective Date

- Routing and Account numbers can be found along the bottom edge of your check.

- Please attach a voided check from your new account to this form.



Customer Signature

Date

AUTHORIZATION TO CHANGE AUTOMATIC PAYMENT

Please update my existing authorization for payment. I have opened a new deposit account and would like to establish automatic payments from this account.



COMPANY/MERCHANT INFORMATION

Company Name

Company Address, City, State, Zip

Account Number on Invoice/Statement



PREVIOUS ACCOUNT INFORMATION

☐

Checking Account

☐

Savings Account

Previous Financial Institution Name

Routing #

Previous Account #



NEW ACCOUNT INFORMATION

☐

Checking Account

☐

Savings Account

Alliant Bank

081506390

New Financial Institution Name

Routing #

New Account #

\$

Amount to be Withdrawn

Date of Withdrawal



CUSTOMER INFORMATION

Day
Evening

Name

Phone Number

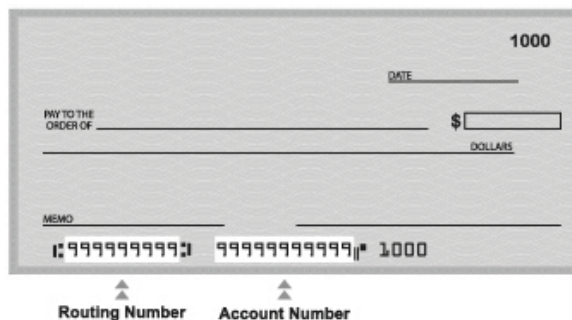
Address, City, State, Zip



Customer Signature

Date

- Routing and Account numbers can be found along the bottom edge of your check.
- Please attach a voided check from your new account to this form.



PLEASE CLOSE MY ACCOUNT

Upon receipt, please close the following account, and send a check for the remaining balance and confirmation of account closure to the address below. If you have any questions about this request, please contact me at the number below.



CLOSED ACCOUNT INFORMATION

☐

Checking Account

☐

Savings Account

Financial Institution Name

Account #



CUSTOMER INFORMATION

Name

Phone Number

Day
Evening

Co-signer Name (if applicable)

Address, City, State, Zip

Phone Number

Sincerely,



Customer Signature

Date

Co-signer Signature (if applicable)

Date