

# CLOSE ACCOUNT

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Date

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Bank's Name

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Address

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City, State, Zip

To Whom It May Concern:

Please close my account \_\_\_\_\_ (account number), and send a check for the remaining balance to me at the address listed below.

If you have any questions about this request, please contact me during the **DAY / EVENING** (circle one) at (\_\_\_\_\_) \_\_\_\_\_ (phone number).

Thank you.

Sincerely,

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Signature

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Co-Signer Signature

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Name (please print)

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Co-Signer Name (please print)

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Address

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City, State, Zip

# CHANGE AUTOMATIC WITHDRAWAL

Please make as many copies as needed for all your automatic withdrawals.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Company That Makes Automatic Withdrawal

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

To Whom It May Concern:

You are currently withdrawing \$ \_\_\_\_\_ (amount) for my \_\_\_\_\_ (what payment is for),  
\_\_\_\_\_ (account or other identifying number) on \_\_\_\_\_ (date) from the following account.

Former Bank: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

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

Please stop making withdrawals from the account and instead make them from:

Bank Name: **Independent Bank** \_\_\_\_\_

Bank Routing Number: **111916326** \_\_\_\_\_

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

If you have any questions about this request, please contact me during the **DAY** / **EVENING** (circle one) at

( \_\_\_\_\_ ) \_\_\_\_\_ (phone number).

Thank you.

Sincerely,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

# CHANGE PAYROLL DIRECT DEPOSIT

For Social Security benefits, please call 1-800-772-1213; direct deposit arrangements can be made over the telephone.

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Date

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Employer/Depositor's Name

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Address

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City, State, Zip

To Whom It May Concern:

You are currently depositing **MY ENTIRE CHECK / PART OF MY CHECK** (circle one) to the following account:

Former Bank: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

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

Please stop making deposits to that account and instead make them from:

Bank Name: **Independent Bank** \_\_\_\_\_

Bank Routing Number: **111916326** \_\_\_\_\_

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

If you have any questions about this request, please contact me during the **DAY / EVENING** (circle one) at

(\_\_\_\_\_) \_\_\_\_\_ (phone number).

Thank you.

Sincerely,

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Signature

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Name (please print)

---

Address

---

City, State, Zip

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Other Information Your Employer May Need (SSN, Employee ID#, etc.)

# NEW ACCOUNT INFORMATION

Client Name \_\_\_\_\_

Home Address \_\_\_\_\_

Rent  Own

City, State, Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Number \_\_\_\_\_

Work Phone Number \_\_\_\_\_

Extension \_\_\_\_\_

E-mail Address \_\_\_\_\_

Social Security Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

Employer Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Driver's License Number \_\_\_\_\_

State \_\_\_\_\_

How did you hear about Independent Bank?

Drive By  Friend/Relative  Newspaper  
 Radio/TV  Other \_\_\_\_\_

Why did you choose Independent Bank?

Bank Employee/Officer  Convenience  Location  
 Referred by friend/relative  Service  
 Other \_\_\_\_\_

Which radio station do you listen to most frequently? \_\_\_\_\_

Which newspaper do you read most frequently? \_\_\_\_\_

***(Please attach a copy of your driver's license. Thank you!)***

## ADDITIONAL SIGNER INFORMATION

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Client Name

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Home Address  Rent  Own

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City, State, Zip

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Home Phone Number

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Cell Number

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Work Phone Number

---

Extension

---

E-mail Address

---

Social Security Number

---

Date of Birth

---

Employer Name

---

Address

---

City, State, Zip

---

Driver's License Number

---

State