

# Easy Switch Kit

All you need to get started!



**K**inderhook Bank  
Your kind of bank.

# Switching to Kinderhook Bank is easy!

## ✔ Open Your New Accounts

Your new Kinderhook Bank savings or checking account opens the door to a number of benefits. Your first step is to complete the New Account Information form. Bring it in to one of our conveniently located offices and a Kinderhook Bank customer service representative will take care of the rest.



## ✔ Change Direct Deposits

To switch any direct deposits you may have set up with your employer, the company handling your retirement or pension payments or the Social Security Administration, complete the Change Direct Deposit form. A Kinderhook Bank customer service representative can take care of the rest.

## ✔ Change Automatic Withdrawals

Next you'll need to contact the companies and financial institutions with which you have established automatic withdrawals. Complete the Change Automatic Withdrawal form and a Kinderhook Bank customer service representative can take care of the rest.

**Automatic withdrawals** through your mortgage company, homeowner's insurance, auto insurance, life insurance or other financial institutions.

**Automatic charges** to your old debit or credit cards with your utility company, telephone company, cable company or other companies.

## ✔ Close Your Old Accounts

Leave your old accounts open long enough for outstanding checks and automatic withdrawals to clear, with enough money in the accounts to cover the transactions. Once the accounts are no longer active, send your former financial institution the enclosed form and request the balance from the accounts. Finally, destroy old checks, ATM/debit cards and deposit slips.

## You're Done!

### We told you it was easy!

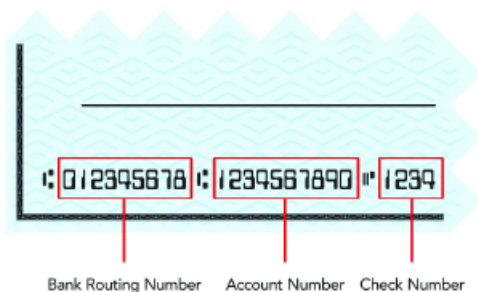
Welcome to the Kinderhook Bank family. We hope you will take advantage of all the great products and services we offer. Don't hesitate to let us know how we can serve you.

## Make the Change

The enclosed forms are intended to help you make the changeover easier. Use these convenient forms to close your accounts and change your direct deposits and automatic withdrawals. If you need help completing any of them, please contact us.

In order to change your direct deposit and automatic withdrawals, you will need to know the bank routing numbers and account numbers from your former financial institution and Kinderhook Bank.

The bank routing number is the first nine digits of the series of numbers printed on the bottom of your checks. Kinderhook Bank's routing number is **021307711**. The account number is the next series of numbers, followed by the check number.



# CLOSE ACCOUNT

\_\_\_\_\_

Date

\_\_\_\_\_

Name of Company That Makes Automatic Withdrawal

\_\_\_\_\_

Address

\_\_\_\_\_

City

\_\_\_\_\_

State

\_\_\_\_\_

ZIP

To Whom It May Concern:

Effective \_\_\_\_\_ (date), please close the following account(s)  
and send a check for the remaining balance(s) to me at the address listed below:

Checking Acct. # \_\_\_\_\_

Checking Acct. # \_\_\_\_\_

Savings Acct. # \_\_\_\_\_

Savings Acct. # \_\_\_\_\_

Please close my certificate of deposit account(s)

\_\_\_\_\_ / \_\_\_\_\_ (account numbers) upon maturity.

If you have questions about this request, please contact me during the

DAY/EVENING (circle one) at ( \_\_\_\_\_ ) \_\_\_\_\_ (phone number).

Thank you,

\_\_\_\_\_

Signature Date

\_\_\_\_\_

Name (please print)

\_\_\_\_\_

Address

\_\_\_\_\_

City

\_\_\_\_\_

State

\_\_\_\_\_

ZIP

# CHANGE AUTOMATIC WITHDRAWAL

\_\_\_\_\_

Date

\_\_\_\_\_

Name of Company That Makes Automatic Withdrawal

\_\_\_\_\_

Address

\_\_\_\_\_

City

\_\_\_\_\_

State

\_\_\_\_\_

ZIP

To Whom It May Concern:

You are currently withdrawing \$ \_\_\_\_\_ (amount)  
from my account on a weekly / bi-weekly / monthly / annual basis (circle one).

Previous Financial Institution: \_\_\_\_\_

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

Financial Institution Account Number: \_\_\_\_\_

Please cancel the withdrawals from the above account, effective  
\_\_\_\_\_ (date), and instead make them from:

Kinderhook Bank, 1 Hudson Street, Kinderhook, NY 12106

Kinderhook Bank Routing Number: 021307711

Kinderhook Bank Account Number: \_\_\_\_\_

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

\_\_\_\_\_

Signature Date

\_\_\_\_\_

Name (please print)

\_\_\_\_\_

Address

\_\_\_\_\_

City

\_\_\_\_\_

State

\_\_\_\_\_

ZIP

# CHANGE DIRECT DEPOSIT

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employer/Depositor's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP

To Whom It May Concern:

You are currently depositing \$ \_\_\_\_\_ (amount)

to the following account:

Previous Financial Institution: \_\_\_\_\_

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

Financial Institution Account Number: \_\_\_\_\_

Please cancel my deposits, effective \_\_\_\_\_ (date), to that  
account and instead send them to:

Kinderhook Bank, 1 Hudson Street, Kinderhook, NY 12106

Kinderhook Bank Routing Number: 021307711

Kinderhook Bank Account Number: \_\_\_\_\_

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP

\_\_\_\_\_  
Other information your employer may need (SSN, Employee ID#, etc.)

# NEW ACCOUNT INFORMATION

## Tell us the accounts you want.

Checking Account    Statement Savings Account    Passbook Savings Account

## Do you want a Kinderhook Bank Check Card?

Yes How many? \_\_\_\_\_    No

## Do you need any automatic payments or deposits switched to this account?

Yes    No

### Applicant

Last name                      First name                      MI

Home Address

Home Phone                      Work Phone

Cell Phone                      E-mail Address

Social Security No.                      Driver's License No.

Date of Birth                      Place of Birth

Mother's Maiden Name

Employer's Name                      Occupation

### Joint Applicant

Last name                      First name                      MI

Home Address

Home Phone                      Work Phone

Cell Phone                      E-mail Address

Social Security No.                      Driver's License No.

Date of Birth                      Place of Birth

Mother's Maiden Name

Employer's Name                      Occupation

**Please read the following statement before signing.** All the information I have given in this form is true and correct. I request the paperwork necessary to open the account(s) indicated above be prepared and understand that my signature(s) and opening deposit(s) will be required at a future date.

I understand that, for my protection, new account applications will be verified by Equifax Financial Services and/or ChexSystems. If more than one person signs below, I understand that this statement applies to both persons.

Signature of Applicant                      Date

Signature of Joint Applicant                      Date