



Let us help you  
switch to the  
bank in your  
own backyard.

*We'll do all the work for you!*

*By providing us with the appropriate information, we can make this transition a breeze.*

### *What you'll find in this kit:*

This Switch Kit will provide all of the forms you need to make the switch to Bank of Blue Ridge.

**We know you'll be glad you did!**

- A New Account Conversion Checklist
- An Automatic Transactions Checklist
- A Bank of Blue Ridge Account Application
- An Account-closing Notice for Your Former Account
- Authorization for Direct Deposit Forms
- Authorization for Automatic Withdrawal Forms
- Authorization for Automatic Payment



A CHATUGE BANK SHARES, INC. COMPANY

*Your home. Your business. Your life.*

[www.BankBlueRidge.com](http://www.BankBlueRidge.com)

220 Orvin Lance Connector • Blue Ridge, Georgia 30513 • 706-632-8682 Voice • 706-632-8411 Fax  
Monday–Friday 8:00 am–5:30 pm • Saturday 8:00 am–noon • Drive-in Window 8:00 am–5:30 pm • Saturday 8:00 am–noon

# HELPFUL CHECKLISTS

*All we need from you is your current account information and your application for a Bank of Blue Ridge Checking Account.  
Use the forms in this kit to notify us of any direct deposit or automatic payments.  
Drop off the information at Bank of Blue Ridge.*

## NEW ACCOUNT CONVERSION CHECKLIST

Once you've opened your Bank of Blue Ridge account, there are a few things that need to be done to make the transition complete:

- Stop using your old account, and let all outstanding checks clear. Also be sure to leave enough funds to cover any automatic payments that may yet need to be withdrawn.
- Turn in your unused checks to us (we'll buy them back!), and destroy ATM/Debit Cards and deposit slips.
- Use the forms in this kit to change any direct deposits automatic withdrawals and automatic payments linked to your debit card. See below for some common examples of these types of transactions.
- Use your free Bank of Blue Ridge Online Banking and Bill Pay to set up automatic payments.
- Close your former account, using the written notice in this kit.

We'll take care of the notification, but we'll need your information and authorization to do so.

## IMPORTANT INFORMATION

Some companies require the use of their own forms to initiate the switch. In order to help facilitate this change from your previous account to your new Bank of Blue Ridge account, we may ask you to provide your current banking information, including a previous bank statement and any forms supplied to you by your employer or party originating the debit or credit.

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. When you open an account, we will ask you for your name, address, date of birth, and other information that allows us to identify you. We may also ask to see your driver's license or other identifying documents.

## AUTOMATIC TRANSACTIONS CHECKLIST

Use this checklist to identify the companies you may need to notify about changing automatic transactions linked to your checking account or debit card.

- Direct Deposit
  - Your employer's human resources department
  - The company handling your retirement or pension payments
  - Social Security Administration
- Anyone who makes automatic withdrawals from your account
  - Mortgage Company
  - Homeowner's Insurance
  - Auto Insurance
  - Life Insurance
  - Other
- Anyone who makes automatic charges to your debit card
  - Utility Companies
  - Telephone Companies
  - Cable Company
  - Other

*For your security, please bring your forms to Bank of Blue Ridge during office hours.*

## How else can we help you?

*Tell us what else you look for in a bank...our products and service are world-class!*

# PERSONAL ACCOUNT INFORMATION

Individual Account     Joint Account

## PRIMARY ACCOUNT HOLDER INFORMATION

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_

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

Driver's License Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ State \_\_\_\_\_

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

Mother's Maiden Name \_\_\_\_\_

Employer \_\_\_\_\_

Position \_\_\_\_\_

Signature \_\_\_\_\_

## JOINT ACCOUNT HOLDER INFORMATION

Name \_\_\_\_\_

Street Address (if different) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_

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

Driver's License Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ State \_\_\_\_\_

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

Mother's Maiden Name \_\_\_\_\_

Employer \_\_\_\_\_

Position \_\_\_\_\_

Signature \_\_\_\_\_

*Please note: We will prepare a formal signature card and account disclosures for a permanent record.  
You will need to bring a valid drivers license when you come to our office to sign account documents.*

# CLOSURE NOTICES

## CHECKING ACCOUNT CLOSURE NOTICE

Name \_\_\_\_\_

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

Joint Owner (if applicable) \_\_\_\_\_

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

*Previous Financial Institution*

Name of Institution \_\_\_\_\_

Street \_\_\_\_\_

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

Checking Account Number \_\_\_\_\_

Please mail balance to      Bank of Blue Ridge  
   P.O. Box XXXX  
   City, ST Zip

I hereby authorize the closure of my checking account. All my checks have cleared the account to be closed and all direct deposits and automatic payments have been stopped.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Joint Owner Signature (if applicable) \_\_\_\_\_

Date \_\_\_\_\_

## CHANGE NOTICE (please check one)

Direct Deposit                       Automatic Payment/Withdrawal

Name \_\_\_\_\_

Social Security Number or  
Identification Number \_\_\_\_\_

Name of Employer,  
Agent or Company \_\_\_\_\_

Street \_\_\_\_\_

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

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

*Previous Financial Institution*

Name of Institution \_\_\_\_\_

Street \_\_\_\_\_

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

*New Financial Institution*

Bank of Blue Ridge  
P.O. Box XXXX  
City, ST Zip

I hereby authorize my direct deposit to be sent to my NEW Checking Account. I have attached a voided check for reference.

Effective (day/month/year) \_\_\_\_\_

Name \_\_\_\_\_

Checking Account Number \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

I hereby authorize you to re-direct future automated payment withdrawals to my NEW Checking Account.

Effective (day/month/year) \_\_\_\_\_

Name \_\_\_\_\_

Checking Account Number \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

