

Switch to Banking as it Should Be

Let SBT be a partner for your finances today and for tomorrow, offering you banking as it should be. The Simsbury Bank offers friendly and fast service, local decision-making, free checking, free online banking, free online bill payment, and thousands of free ATMs in the Northeast. In short, real live people and services to help you manage your finances today and plan for your financial future.

Inside you'll find all you need to let us welcome you to our Bank:

- ◆ Tips to Make the Switch Easy
- ◆ New Account Application
- ◆ Direct Deposit Switch Authorization
- ◆ Automatic Payments/Transfers
- ◆ Account Closing Letter for your old bank

Simply print out these forms and complete them at your convenience. Then, bring them to any branch and our personal bankers will promptly set you up with your accounts. Or, just come into any branch and we can open your accounts without this Switch Kit. Thank you for your business.

Tips to Make the Switch Easy

- Open new account(s) at The Simsbury Bank (form enclosed)
- Sign up for direct deposit (form enclosed)
- Sign up for overdraft protection
- Change all automatic payments/ transfers to your new account (form enclosed)
- Stop using your old account(s)
- Be sure all checks have cleared your old account(s) and that all automatic payments and debits have been stopped
- Be sure your old overdraft line is paid off
- Fill out the Account Closing Letter (form enclosed)
- Be sure you receive a closing statement from your old bank
- Ask us about mortgages, home equities and other loans





Direct Deposit Switch Authorization

To (Firm or Institution)	_____
From (Account Holder)	_____
Account Holder Address	_____
City/State/Zip	_____
Social Security Number	_____

Effective _____, please **change** my direct deposit to:

The Simsbury Bank & Trust Company account(s) below
Main Office: 981 Hopmeadow Street, P.O. Box 248, Simsbury, CT 06070, Tel. 860-658-2265

The Simsbury Bank & Trust Company's ABA-Routing/Transit Number is 011104351

Checking Account # _____	Amount or % of Deposit _____
Checking Account # _____	Amount or % of Deposit _____
Savings Account # _____	Amount or % of Deposit _____
Savings Account # _____	Amount or % of Deposit _____

Effective _____, please **discontinue** my direct deposit to:

Institution _____

Account #s _____

I authorize these direct deposit changes effective the dates noted above. These new instructions remain in effect until I request otherwise in writing. I authorize The Simsbury Bank to make credit and adjustment entries to my account(s).

Signature of Employee or Retiree

Date

Print Name of Employee or Retiree

If allowed by your employer, you may use this form as-is. If your employer has its own form this is the information you will need to tell them. Questions? Call your Simsbury Bank Personal Banking Representative, or, for Federal Government Direct Deposits:

Social Security	1-800-772-1213 or www.ssa.gov/deposit/	Federal Employees	1-888-767-6738
Veteran's Benefits	1-877-838-2778	Railroad Retirement	1 800-808-0772

Account Closing Letter

(date)

To: _____
(old bank name)

(old bank address)

(old bank address)

Re: Request to close accounts

I have recently changed banks. Please close the accounts listed below and send a check, including all accrued interest, to the account holder's address below or to The Simsbury Bank, P.O. Box 248, Simsbury, CT 06070. Should you have any questions, please call The Simsbury Bank at 860-658-2265 or the number below.

Account Numbers	Account Type		
_____	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	<input type="checkbox"/> Money Market
_____	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	<input type="checkbox"/> Money Market
_____	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	<input type="checkbox"/> Money Market
_____	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	<input type="checkbox"/> Money Market

Account Owner Information and Authorization

Account Holder Name

Co-Account Holder Name

Address

City, State, Zip

Telephone Numbers and Email Address

Authorization to close the account(s) noted above.

Account Holder Signature

Co-Account Holder Signature (if applicable)

Print Name

Print Name