Getting Started

Making the switch to better banking today!

You can make the move to Synergy Bank in three easy steps. Everything you'll need is provided in this handy Switch Kit. We can't wait to welcome you to Synergy Bank, where you'll enjoy a better experience for all your banking needs!

Open your new account.

Apply online in minutes or visit your local branch to open your new Synergy Bank account(s).

Switch your direct deposits and automatic withdrawals.

If you have any automatic transactions, use the provided forms to seamlessly switch them to Synergy Bank.

Close your old account.

Now you're ready to switch. Simply fill out the provided form to close your old account. Any remaining account balance will be transferred to Synergy Bank.





Direct Deposit Authorization

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize your employer, retirement and pension funds, or any other agency to deposit your payment directly into your Synergy Bank account. Use one form for each direct deposit.

Notification of Direct Deposit Authorization Change

Company or Employer:				
Address:				
City, State, Zip:				
Phone Number:				
Employee ID: <i>(if applicable)</i>				
Effective immediately, please deposit the net amount of my check to my Synergy Bank				

account. I authorize (name of depositor)

to automatically deposit funds into the account below. This authorization shall remain in place until I have submitted a new authorization, or until this authorization is changed or revoked by me in writing.

Place an X next to your desired option.

Net amount to Synergy Bank CHECKING						
Account #			Routing #	065405297		
Net amount to Synergy Bank SAVINGS						
Account #			Routing #	065405297		
Signature:			[Date:		
Name:						
Address:						
City, State, Zip:						
Phone Number:						

Direct Deposit Checklist:

Use this list to remember all your direct deposits you need to transfer. These are the most common direct deposits.

Payroll
Investments
Retirement Plans
Social Security



Automatic Withdrawal Authorization

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize a change to any automatic payment, deductions, or withdrawals from your account. Use one form for each automatic withdrawal. Or, many companies and agencies make it easy to change your account on record online on their website.

Notification of	Withdrawal Authorization Ch	ange	Automatic Withdrawal Checklist:
Name of Company:			Use this list to remember all your
Account Number:			automatic payments you need to transfer. These are some of the
Payment Amount:			most commonly used automatic payments.
Address:			
City, State, Zip:			Home Mortgage
Phone Number:			Auto Loans
			Utilities
Please change my autor	matic withdrawal from the following account	:	Insurance
Financial Institution:			Cable/Internet
Account #	Donk Douting #		Gym/Club Memberships
ACCOUNT #	Bank Routing #		Credit Cards
Please make all future a	automatic withdrawals from the following acc	count:	Investments
Financial Institution:	Synergy Bank		Subscriptions
Account #	Bank Routing #	065405297	Charity Donations
Thank you very much	1.		
	nain in effect until I have submitted to you a ne o me in writing that this authorization has been		
Signature:		Date:	
Name:			
Address:			
City, State, Zip:			







Account Closure Authorization

You can authorize your remaining balance to be deposited automatically to your new Synergy Bank account(s) or paid by a check forwarded to your mailing address.

Use this form to close your account(s) at your former financial institution. Be sure to verify any outstanding items have cleared your old account.

Notification of A	Congratulations!	
To Whom It May Conce	You had to sign your name a few timesbut submitting these forms	
Financial Institution:		completes your switch to a truly better banking experience. We can't
Address:		wait to show you the difference a local partner makes.
City, State, Zip:		Welcome to Synergy Bank!
Please close my accou	nt:	
Account Number:	Primary Owner:	
Address:		
City, State, Zip:		
Please send the remair	ning balance to:	
Place an X next to your des	ired option.	
Please depo	sit directly to my new account at Synergy Bank.	
Account #	Routing # 065405297	
Please forwa	ard me a check to my address listed below.	
Primary Signature:	Date:	
Joint Signature:		
Name:		
Address:		
City, State, Zip:		
Phone Number:		

Synei

Bar

