

Easy Switch Kit Checklist

Blackhawk Bank's Easy Switch Kit takes the guesswork out of changing your accounts from your current bank. Whether you want to fill out the forms on your own or have one of our experienced bankers assist, we'll make sure the switch is painless.

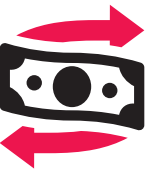
Follow the list below to get started!



1. Open an account at Blackhawk Bank at any one of our convenient Banking Centers or open your account online.



2. Verify all debit card purchases, automatic payments and checks have cleared the account you plan to close.



3. Send the [Easy Switch Direct Deposit Authorization](#) to change your direct deposit from your employer, social security, pension, etc.



4. Send the [Easy Switch Automatic Payment Authorization](#) to change your automatic payment to your cell phone carrier, utility companies, insurance company, etc. (Tip: Reviewing your previous six months of statements will help identify payees.)



5. Review Online Bill Pay for the account you plan to close and stop all automatic payments.



6. Set up Bill Payments through Blackhawk Bank's Online Banking, known as NetTeller.



7. Send the [Easy Switch Account Closing Authorization](#) to the bank where the account is being closed.

Easy Switch Direct Deposit Authorization

I (Blackhawk Bank Client) hereby authorize _____ (The Company, i.e. Employer or other entity) to initiate a Direct Deposit to my checking/savings account at Blackhawk Bank, and to debit (if necessary) any amount deposited in error. This authority will remain in effect until The Company is notified by me in writing to cancel it in such time as to afford The Company and Blackhawk Bank a reasonable opportunity to act on it.

IF YOU HAVE ANY QUESTIONS,
Please contact Blackhawk Bank at 800.209.2616

Blackhawk Bank, P.O. Box 719
Attn: Client Services
Beloit Wisconsin 53512-0719

BLACKHAWK BANK ABA ROUTING NUMBER: **275971854**

Attach Voided Check or
Deposit Slip Here

Listed below is the account number(s) needed to establish Direct Deposit to my new Blackhawk Bank account(s).

Account #: _____

Is this account: Checking Savings Other _____

Amount OR % of Deposit: _____

Account #: _____

Is this account: Checking Savings Other _____

Amount OR % of Deposit: _____

Blackhawk Bank Client Signature: _____

Name Printed: _____

Date: _____

The Company is required to have a signed authorization on file for each credit or debit originated. The Company should keep the original form in their files for a period of not less than two years after the agreement is terminated. Blackhawk Bank may request an updated copy of the form from the Company any time a change is made.



Easy Switch Account Closing Authorization

Account Holder Name: _____

Social Security Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Joint owner (if applicable): _____

Previous Financial Institution Information

Institution Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Checking Savings Other _____

Account Number: _____

Checking Savings Other _____

Account Number: _____

Checking Savings Other _____

Account Number: _____

Please mail remaining account balances to:

Blackhawk Bank

Attn: Main Teller Line

P.O. Box 719

Beloit, WI 53512-0719

When mailing remaining balance, please reference customer's name and account number ending in _____.

(last 4 numbers of
Blackhawk Bank account)

Questions? Call 800.209.2616

I hereby authorize the closure of the account(s) listed above. I acknowledge that all debts and checks have cleared the account(s) to be closed. In addition, I confirm that all parties for direct deposit and automatic payments have been notified to stop.

Account Owner Signature

Date

Joint Owner Signature (if applicable)

Date


Blackhawk Bank

The advice you need for the life you want.

MEMBER FDIC  EQUAL HOUSING LENDER

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