

#### "Make the Switch" Instructions

1. Fill out all requested information on the "Make the Switch Form." To complete the application process bring this form and your photo I.D. to your local LCBT branch. (Sorry, due to banking regulations, you will need to complete your new account opening with an in-branch visit. For security purposes, please DO Not fax or email the "Make the Switch Form". We look forward to seeing you soon at any one of our convenient locations.

Elba Office

Attica Office

4515 Imlay City Rd.

83 W. Nepessing St. (810) 664-2977	637 S. Main St. (810) 664-9986	5508 Davison Rd. (810) 653-2106	4515 Imlay City Rd (810) 724-6436
Metamora Office	Deerfield Office		Imlay City Office
3414 S. Lapeer Rd.	M-24 & Burnside Rd.		1875 S. Cedar St.
(810) 678-3373	(810) 793-6311		(810) 724-4652

Southgate Office

- 2. Stop using your old account. Be sure to leave sufficient funds in the account until all outstanding checks and automatic payments have cleared. Destroy any unused checks, ATM and debit cards and deposit slips.
- 3. Change direct deposits. Use the "Make the Switch Direct Deposit Form" and give it to your employer or your retirement plan. Include a new LCBT deposit ticket or voided check. For Social Security, direct deposit changes call 1-800-772-1213.
- 4. Change automatic payments. Use the "Make the Switch Change Automatic Payments" form to change all automatic withdrawals or automated payment services. Print the number of copies you need to change all your payments.
- 5. Close your old account. Send the "Make the Switch Authorization to Close Account" form to your previous financial institution to close your accounts. If, after all your checks have cleared, you have a remaining balance, they will send you a check. It is just that simple.

Still have questions? Visit your local Lapeer County Bank & Trust Co. branch or call at the number listed above.

Now more than ever, local banking makes sense! Welcome to Lapeer County Bank & Trust Co.!

Main Office



### "Make the Switch" Form

**Member FDIC** 

#### INDIVIDUAL ACCOUNT

#### **JOINT ACCOUNT**

Name		Name			
Street Address		Street Address			
City		City	<del></del>		
State, Zip		State, Zip			
Mailing Address (if different)		Mailing Address (if different)			
Home Phone ()		Home Phone () Work Phone ()			
PRIMARY ACCOUNT HOLE INFORMATION	DER	JOINT ACCOUNT H INFORMATIO			
Social Security Number		Social Security Number			
Driver's Lic. Number		Driver's Lic. Number			
Issuing StateExp. Date		Issuing StateExp. Date			
* Please Note: Federal regulation requires that I identification. Please be prepared to have our curequested.					
Date of Birth//		Date of Birth//			
Employer		Employer			
Mother's Maiden Name		Mother's Maiden Name			
The information I have provided is correct to t check credit and/or employment history should			ank & Trust Co. to		
Signature	Date	Signature	Date		

The information requested on this form is considered confidential. For this reason, we are asking you to print out the form, fill it out and bring it to your local branch office. Stop in to show your identification, sign forms and make a deposit to open your account.

"Make the Switch" to Lapeer County Bank & Trust Co. today.



"Make the S	Switch – Dire	ect Deposit	Form"		
Date					
Company Name					
Address					
City	State	;	Zip		
You are currently depositing _	deposit type – payo	check, social securi	ey, other		
into the following account:					
Bank name					
Routing number	outing number Account number				
I authorize you to redirect this effective(Date)		oosit into my r	new account		
New Bank					
Lapeer County Bank & Trust	Co.				
Routing number <u>072403046</u>	Accoun	t number			
If you have any questions, you	ı may contact n	ne at the follo	wing phone number –		
Preferred phone number – Day Evening Ce	II (please circle)				
Sincerely,					
Signature					
Name (please print)					
Address					
CityS	State	_ Zip			

Please print and fill out as many forms as needed. Please attach a copy of a voided check from your <u>new</u> account.



# "Make the Switch - Change Automatic Payments Form" Company Name \_\_\_\_\_ City\_\_\_\_\_ State\_\_\_\_ Zip \_\_\_\_\_ You are currently withdrawing \$\_\_\_\_\_ from the following account\_\_\_\_\_ \_\_\_\_\_ on the \_\_\_\_\_ day of each month. Bank name \_\_\_\_\_ Routing number\_\_\_\_\_ Account number\_\_\_\_\_ I authorize you to: Stop making withdrawals from the above account on: \_\_\_\_\_\_\_(Date) Lapeer County Bank & Trust Co. Routing number 072403046 Account number \_\_\_\_\_ If you have any questions, you may contact me at the following phone number -Preferred phone number – Day Evening Cell (please circle) Sincerely, Name (please print) \_\_\_\_\_ City\_\_\_\_\_ State\_\_\_\_ Zip \_\_\_\_\_

Please print and fill out as many forms as needed. Please attach a copy of a voided check from your new account.



## "Make the Switch - Authorization to Close Account" To: Date \_\_\_\_\_ **Street Address** City, State, Zip Please accept this letter as authorization to close the account(s) indicated below. Please send me a check for the remaining balance. OR Please send Lapeer County Bank & Trust Co. (R & T 072403046) a check for the remaining balance and credit my account number: \_\_\_\_\_

If you have any questions regarding this request, please contact me in writing or the telephone number listed below.

Savings account number

Other

Thank you for your assistance.

Sincerely,

Please close my:

Checking account number

Authorized Signature (Original Signature on account required to authorize) Street Address City, State, Zip

Preferred phone number Day/Evening/Cell (please circle one)