



## BUSINESS SWITCH KIT

### *Move to a Better Way of Banking*

Whatever your business goals or wherever your business leads you, CNB Bank & Trust can help you get there. At CNB, we offer a wide selection of checking, savings and investment accounts to meet the unique needs of your business. We want to help you move to a better way of banking, so we're making it easy to switch from your old bank to CNB.

When you open a new CNB business checking or savings account, our bankers will work with you to provide a solution that is right for you and your business. We hope you find this Business Switch Kit a simple and quick way to transfer your automatic deposits, withdrawals, and payments from your existing account(s) to CNB.

Please review and complete the enclosed Account Switch forms. Once completed, please visit one of our CNB facilities and we'll open your new account(s). We look forward to visiting with you.

#### **Let's get started making the switch to CNB Bank & Trust.**

Make the move to CNB—in just four easy steps:

1. Visit your nearest CNB facility or call us to open a new business checking or savings account.
  - Meet with a CNB banker to review your completed forms for the account that's right for you.
  - Let us help you set up Online Banking and Bill Pay for your new account.
2. Balance your old account—and quickly plan to stop using it.
3. Switch your automatic deposits and withdrawals/online payments.
  - Complete a copy of the enclosed *Automatic Deposit/Automatic Withdrawal or Payment Change Notification* form for each company or organization that currently processes automatic deposits or automatic withdrawals for you. Please complete a change form for each company so that your automated deposits and withdrawals will be redirected to your new CNB account.
  - Give copies to your merchant credit card processor, if applicable.
4. Close your old account.
  - Complete the enclosed *Account Closing Request* form to instruct your old bank how and where to send a check for any remaining balance to your CNB banking center.



# AUTOMATIC DEPOSIT/AUTOMATIC WITHDRAWAL OR PAYMENT CHANGE NOTIFICATION FOR BUSINESS ACCOUNTS

**To** \_\_\_\_\_ **Date** \_\_\_\_\_  
Name of Company / Organization

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

Your Account Number at Company / Organization \_\_\_\_\_

**From** \_\_\_\_\_  
Your Business Name

\_\_\_\_\_  
Business Address

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

## To Whom It May Concern

*I authorize you to redirect the following for the above account number to my new CNB Bank & Trust account as instructed below.*

PLEASE CIRCLE YOUR SELECTION FOR EITHER A OR B.

- A. Automatic deposit
- B. Automatic withdrawal/online payment

Please Make Effective:  Immediately  Beginning on \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## New CNB Bank & Trust Account Information

CNB Routing Number: \_\_\_\_\_      \_\_\_ Checking    \_\_\_ Savings

CNB Account Number: \_\_\_\_\_

Authorizing Officer Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

If you have questions about this request, please call the above at: (      ) \_\_\_\_\_

*(For withdrawal or online payment notification, please attach a CNB voided check.)*

**Note:** Please confirm that this form can be used by the named company or organization.

# ACCOUNT CLOSING REQUEST



**Date** \_\_\_\_\_

**To** \_\_\_\_\_

Name of Financial Institution

\_\_\_\_\_  
Address of Financial Institution

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

***Please close the following account(s) our business has at your institution. I/We attest there are no outstanding items and that all direct deposits or automatic debits have been redirected to our new bank account. I/We have verified the remaining account balance and are aware of any fee(s) you might collect to process this account closing request.***

Account # \_\_\_\_\_  Checking  Savings  Money Market  Other \_\_\_\_\_

Account # \_\_\_\_\_  Checking  Savings  Money Market  Other \_\_\_\_\_

Account # \_\_\_\_\_  Checking  Savings  Money Market  Other \_\_\_\_\_

***You are authorized to process this request, and immediately forward the remaining funds in the account(s) by check as follows:***

**Business Name:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

***If you have any questions about this request, please call (       ) \_\_\_\_\_***

***Sincerely,***

\_\_\_\_\_  
Signature – Primary Account Holder

\_\_\_\_\_  
Printed Name – Primary Account Holder

\_\_\_\_\_  
Signature – Secondary Account Holder

\_\_\_\_\_  
Printed Name – Secondary Account Holder