

SWITCH TO FIRSTBANK.....

WE'LL MAKE IT EASY, EVERY STEP OF THE WAY.

1. **SET UP YOUR NEW ACCOUNT** – FILL OUT OUR **NEW ACCOUNT INFORMATION** AND WE'LL HAVE EVERYTHING WE NEED TO ESTABLISH YOUR NEW ACCOUNT.
2. **CLOSE YOUR OLD ACCOUNT(S)** – OUR **ACCOUNT CLOSING LETTER** IS ALL READY FOR YOU TO FILL IN THE BLANKS AND SIGN; IT NOTIFIES YOUR OLD BANK ABOUT THE ACCOUNTS YOU ARE CLOSING AND GIVES DIRECTIONS FOR DISBURSEMENT OF ANY REMAINING FUNDS. IF YOU HAVE ELECTRONIC BILL PAYMENT AT YOUR OLD BANK, BRING US THE LIST OF YOUR PAYEES AND WE'LL HELP YOU SET THEM UP!
3. **SET UP YOUR DIRECT DEPOSITS** – SIMPLY SEND OUR **DIRECT DEPOSIT REQUEST FORMS** TO YOUR EMPLOYER OR OTHER PAYMENT SOURCE, SO YOUR FUNDS CAN BE QUICKLY AND AUTOMATICALLY DEPOSITED TO YOUR ACCOUNTS EACH PAY PERIOD. AND, IF YOU ALREADY HAVE YOUR **DIRECT DEPOSIT** GOING ELSEWHERE, YOU CAN SIMPLY SWITCH IT TO YOUR NEW FIRSTBANK ACCOUNT.
4. **SWITCH OVER AUTOMATIC PAYMENTS** – FILL OUT AND SIGN THE **AUTOMATIC PAYMENT CANCELLATION LETTERS** AND SEND IT TO EACH OF YOUR VENDORS TO SWITCH ANY AUTOMATIC PAYMENTS SO THEY'LL COME OUT OF YOUR NEW FIRSTBANK ACCOUNT.



NEW ACCOUNT INFORMATION

__ INDIVIDUAL ACCOUNT

__ JOINT ACCOUNT

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY, STATE, ZIP

CITY, STATE, ZIP

MAILING ADDRESS (IF DIFFERENT)

MAILING ADDRESS (IF DIFFERENT)

HOME PHONE WORK PHONE

HOME PHONE WORK PHONE

E-MAIL ADDRESS

E-MAIL ADDRESS

PRIMARY ACCOUNT HOLDER INFORMATION

JOINT ACCOUNT HOLDER INFORMATION

SOCIAL SECURITY NUMBER

SOCIAL SECURITY NUMBER

DRIVERS LICENSE NUMBER EXPIRATION DATE

DRIVERS LICENSE NUMBER EXPIRATION DATE

DATE OF BIRTH

DATE OF BIRTH

ACCESS CODE (ALPHA OR NUMERIC)

ACCESS CODE (ALPHA OR NUMERIC)

EMPLOYER

EMPLOYER

OCCUPATION

OCCUPATION

I WOULD LIKE TO OPEN:

__ FIRSTFREE* __ FIRSTSENIOR __ FIRSTPREMIUM __ FIRSTINVESTMENT __ FIRSTFREEBUSINESS*

__ MONEY MARKET __ PERSONAL SAVINGS __ BUSINESS CHECKING __ CD __ IRA

__ I/WE WOULD LIKE AN ATM / DEBIT CARD (CIRCLE ONE). #OF CARDS: __**

__ I/WE WOULD LIKE FREE ONLINE ACCESS TO ACCOUNTS.**

__ I/WE WOULD LIKE FREE BILL PAY.**

PLEASE NOTE THAT PRIMARY AND JOINT ACCOUNT HOLDERS WILL NEED TO SIGN AN OFFICIAL ACCOUNT FORM IN PERSON AT OUR FIRSTBANK OFFICE BEFORE THE ACCOUNT CAN BE OPENED. FOR YOUR OWN ACCOUNT SECURITY, WE WILL ALSO NEED TO PHOTOCOPY YOUR DRIVER'S LICENSE(S), OR OTHER FORM OF ID, SO WE CAN HAVE IT ON FILE TO ACCURATELY IDENTIFY YOU IN THE FUTURE.

* ESTATEMENTS REQUIRED. ** SEPARATE DOCUMENTS REQUIRED.

(THE PURPOSE OF THIS QUESTIONNAIRE IS TO BEGIN THE APPLICATION PROCESS. ALL APPLICATIONS ARE SUBJECT TO APPROVAL.)





ACCOUNT CLOSING REQUEST

To: _____

FROM: PRIMARY ACCOUNT HOLDER _____

SOCIAL SECURITY NUMBER _____

SECONDARY ACCOUNT HOLDER _____

ADDRESS _____

CITY, STATE, ZIP _____

PLEASE CLOSE THE FOLLOWING ACCOUNT(S) WITH YOUR INSTITUTION:

Table with 4 columns: ACCOUNT TYPE, ACCOUNT #, SEND PAYMENT AT ONCE, DEFER PAYMENT UNTIL CLOSE OF INTEREST PERIOD

(NOTE: If closing out a passbook account, please include passbook with this letter)

PAY TO THE ORDER OF: FIRST FEDERAL BANK TEXAS
C/O PRIMARY ACCOUNT HOLDER NAME
TOGETHER WITH ALL INTEREST OR DIVIDENDS THAT MAY HAVE BECOME DUE ON ABOVE LISTED ACCOUNTS.

FORWARD FUNDS TO: FIRST FEDERAL BANK TEXAS
P.O. BOX 6910
TYLER, TX 75711
903-593-1767

PRIMARY ACCOUNT HOLDER SIGNATURE _____

SECONDARY ACCOUNT HOLDER SIGNATURE _____

DATE _____





DIRECT DEPOSIT REQUEST

To: _____
FROM: PRIMARY ACCOUNT HOLDER _____
SOCIAL SECURITY NUMBER _____
SECONDARY ACCOUNT HOLDER _____
ADDRESS _____
CITY, STATE, ZIP _____

(NOTE: FOR SOCIAL SECURITY DEPOSIT, WE CAN ASSIST YOU WITH CALLING THE SOCIAL SECURITY ADMINISTRATION DIRECT DEPOSIT DEPARTMENT AT 1-800-772-1213 OR SIGNING UP ONLINE AT WWW.SSA.GOV/DEPOSIT/.)

PLEASE SEND AN AUTOMATIC DIRECT DEPOSIT TO:

FIRST FEDERAL BANK TEXAS
P.O. Box 6910
TYLER, TX 75711
903-593-1767

BANK ROUTING & TRANSIT NUMBER
311973279

PLEASE DISCONTINUE SENDING MY AUTOMATIC DIRECT DEPOSIT TO:

(PREVIOUS FINANCIAL INSTITUTION): _____
ACCOUNT# _____

PLEASE BEGIN SENDING THE SAME DEPOSIT TO FIRST FEDERAL BANK TEXAS

DEPOSIT \$ _____ OR ENTIRE AMOUNT TO CHECKING ACCOUNT # _____

DEPOSIT \$ _____ OR ENTIRE AMOUNT TO SAVINGS ACCOUNT # _____

I AUTHORIZE:

- I. ABOVE LISTED ENTITY TO INITIATE DEPOSIT OF MY FUNDS TO MY FIRSTBANK CHECKING ACCOUNT.
II. FIRSTBANK TO CREDIT ENTRIES TO MY ACCOUNT
III. THIS AUTHORIZATION TO REMAIN IN EFFECT UNTIL I SEND WRITTEN NOTICE OF CHANGE OR CANCELLATION.

SIGNATURE: _____ DATE: _____





AUTOMATIC WITHDRAWAL TRANSFER

To: _____
FROM: PRIMARY ACCOUNT HOLDER _____
SOCIAL SECURITY NUMBER _____
SECONDARY ACCOUNT HOLDER _____
ADDRESS _____
CITY, STATE, ZIP _____

PLEASE BE ADVISED THAT I HAVE RECENTLY CHANGED BANKS AND WILL NEED TO HAVE MY AUTOMATIC WITHDRAWAL SWITCHED FROM MY OLD ACCOUNT TO MY NEW ACCOUNT WITH **FIRSTBANK**. THE AUTOMATIC WITHDRAWAL IS BEING APPLIED TO THE FOLLOWING ACCOUNT, WHICH I HAVE WITH YOUR ORGANIZATION:

ACCOUNT # WITH COMPANY: _____
DEBIT AMOUNT: _____

I CURRENTLY HAVE MY AUTOMATIC DEBIT COMING OUT OF THE FOLLOWING ACCOUNT:

PREVIOUS FINANCIAL INSTITUTION: _____
ACCOUNT #: _____
ABA ROUTING #: _____

AS SOON AS POSSIBLE, I WOULD LIKE TO REDIRECT THIS AUTOMATIC DEBIT TO MY NEW ACCOUNT WITH FIRSTBANK AS FOLLOWS:

CHECKING OR SAVINGS; (CIRCLE ONE) ACCOUNT #: _____
FIRST FEDERAL BANK TEXAS ABA ROUTING #: 311973279

IF YOU HAVE ANY QUESTIONS, PLEASE CALL ME AT: _____

SIGNATURE: _____ DATE _____

