



Welcome to Hebron Savings Bank!

We understand that changing banks can be difficult, but we have put together a list of steps and resources to make your switch as convenient as possible.

Step 1: Open your new Hebron Savings Bank Account.

An account can be opened at any of our 13 convenient locations. A list of necessary information for account opening is included in this document.

Step 2: Register for our Digital Banking Channels.

Hebron Savings Bank is proud to offer Online and Mobile Banking options.

Step 3: Stop using your old account(s).

Let all pending payments post to the account, but do not write any additional checks or use your old ATM/debit card. Be sure to cancel any Bill Pays that are currently set up in your old system.

Step 4: Move your Direct Deposits to your New Account.

Use our **Direct Deposit Change Form** to inform companies of your account changes and move your deposits to your new account(s). If you do not have direct deposit set up currently, a **New Direct Deposit Form** is also provided. Understand that the recipient of the form may have an internal form that they need, the forms below have been provided for convenience.

Examples Include:

- Brokerage Deposits
- CD Interest Payment
- Child Support or court-issued deposits.
- Government/Military
- Payroll
- Pension
- Social Security

Changes for social security deposits may be made by calling Social Security Administration at **1-800-772-1213** or log on to <https://www.ssa.gov/>

Step 5: Move your Automatic Withdrawals to your New Account.

Use our **Automatic Payment Change Request Form** to notify each company that makes automatic debits from your accounts. Do not forget automatic payments that are tied to your debit card through companies such as PayPal or Apple Pay. Understand that the recipient of the form may have an internal form that they need, the forms below have been provided for convenience.

Examples include:

- Auto Insurance
- Brokerage or Investments
- Cable Company
- Cell Phone Company
- Child Support
- Homeowner's Insurance
- Internet Service
- Life Insurance
- Loan Payments
- Mortgage Company
- Telephone Company
- Utilities Companies

Step 6: Close your old account(s).

Your old accounts should stay open long enough for pending payments and outstanding checks to clear. It is possible this could take several weeks. Once all payments have cleared the account, you should be able to close the accounts using our **Request to Close Account Form**. You may use this form in person or mail it to your old bank to request they mail the remaining balance to you with a confirmation of closure. Understand that the recipient of the form may have an internal form that they need, the forms below have been provided for convenience. **Accounts related to IRAs cannot be closed with the attached form as they have their own closure process.**

Step 7: Protect Your Information.

Be sure to shred or destroy any old checks, deposit slips or ATM/Debit cards. Check your account closure verification to be sure that all online access was disabled per your request.

Step 8: Enjoy your New Account!

Visit Online at www.hebronsavingsbank.com or visit any of our 13 locations to learn more about our products, services and ATM locations.

Please do not hesitate to contact us about any questions you have regarding your switch to Hebron Savings Bank. If we can assist you in filling out any of these forms, please stop into one of our locations or call our customer service number at 410-749-1185. Our friendly staff is waiting to help you make the switch!



New Account Information

In compliance with the USA PATRIOT Act Federal law now requires all financial institutions to obtain, verify and record information that identifies each person who opens an account.

Opening a new account requires that we obtain information from you to be able to maintain security on your new account. Below is a list of information that we will require at account opening.

- Name - First, Last and Middle initial
- Street Address
- Mailing Address, if different than above
- Date of Birth
- Social Security Number or Tax Payer Identification Number
- Phone Number
- Employer
- E-mail Address
- Mother's Maiden Name
- Password or Pin, created to help identify you when you call in to inquire about your account
- Identification - See below

When you open an account, you will be asked for information that will allow us to identify you. Hebron Savings Bank does require:

One form of primary identification from the following list of unexpired documents:

- Driver's License
- State Issued Identification Card
- Military Identification Card
- Passport
- Alien Identification Card
- Green Card

And one form of unexpired secondary ID:

- A known employer ID card
- A state or local government employee ID card
- A voter registration card with signature and consistent information
- Birth Certificate
- Major credit card, with signature
- Property Tax Bill in the name of the account owner
- Social Security Card
- Insurance Card
- Utility Bill, with current address



New Direct Deposit Form

Date: _____

To: _____ (Company Name)
_____ (Address of Company)
_____ (City, State, Zip)

Company or Agency making a direct deposit to your New Account.
*Please verify with the recipient of this form there is not an internal process that needs to be completed.
This form is provided for convenience.

To Whom It May Concern:

Effective immediately, I hereby authorize you to start making these automatic deposits into the following account at Hebron Savings Bank.

Bank Name: **Hebron Savings Bank**
Routing Number: 052101669
Account Number: _____ Checking Savings

Please send me confirmation indicating when this change in my deposit will be effective. My contact information is below.

Sincerely,

Your Signature (Name) _____
(Street Address) _____
(City, State, Zip) _____
(Phone Number) _____
(E-Mail) _____



Direct Deposit Change Form

Date: _____

To: _____ (Company Name)
_____ (Address of Company)
_____ (City, State, Zip)

Company or Agency making a direct deposit to your New Account.
*Please verify with the recipient of this form there is not an internal process that needs to be completed.
This form is provided for convenience.

To Whom It May Concern:

Currently, you are depositing a recurring payment into the following account:

Bank Name: _____
Routing Number: _____
Account Number: _____

Effective immediately, I hereby authorize you to start making these automatic deposits into the following account at Hebron Savings Bank.

Bank Name: **Hebron Savings Bank**
Routing Number: **052101669**
Account Number: _____ Checking Savings

Please send me confirmation indicating when this change in my deposit will be effective. My contact information is below.

Sincerely,

Your Signature (Name) _____

(Street Address) _____

(City, State, Zip) _____

(Phone Number) _____

(E-Mail) _____



Automatic Payment Change Request Form

Date: _____

To: _____ (Company Name)
_____ (Address of Company)
_____ (City, State, Zip)

From: _____ (Name)
_____ (Home Address)
_____ (City, State, Zip)
_____ (Account Number – If Applicable)

Company or Agency automatically debiting your account for payment.
*Please verify with the recipient of this form there is not an internal process that needs to be completed.
This form is provided for convenience.

To Whom It May Concern:

Currently, you are debiting payment from the following account:

Bank Name: _____
Routing Number: _____
Account Number _____

Effective immediately, I hereby authorize you to stop debiting from the above account and start debiting this payment from my new account at Hebron Savings Bank.

Bank Name: **Hebron Savings Bank**
Routing Number: 052101669
Account Number: _____ Checking Savings

Please send me confirmation indicating when this change takes effect. My contact information is below.

Sincerely,

Your Signature (Name) _____
(Street Address) _____
(City, State, Zip) _____
(Phone Number) _____
(E-Mail) _____





Request to Close Account

Date: _____

To: _____ (Bank Name)
_____ (Address)
_____ (City, State, Zip)

*Please verify with the recipient of this form there is not an internal process that needs to be completed. This form is provided for convenience.

To Whom It May Concern:

Please close the account(s) noted below, mail the balance and any interest, and a confirmation of account closure to the address listed below:

Account Number

- Checking Account: _____
- Savings Account: _____
- Money Market Account: _____
- Certificate of Deposit: _____

Please close my CD immediately. I understand there may be penalties for withdrawing before the maturity date.

Please close my CD upon maturity.

Please also verify:

- My ATM/Debit Cards have been closed.
- My online/mobile banking has been disabled.
- All my Bill Pays have been cancelled.

If you have any questions regarding this request, please contact me.

Sincerely,

Your Signature

(Name) _____
(Street Address) _____
(City, State, Zip) _____
(Phone Number) _____
(E-Mail) _____

