Hendricks County Bank
Since 1908
and Trust Company

1 E. Main St., Brownsburg, IN 46112

5 Convenient Locations to Serve You
Brownsburg (2) ✪ Danville ✪ Plainfield ✪ Avon

MAKE THE SWITCH CHECKLIST

Moving all your accounts to **Hendricks County Bank and Trust Company** has never been easier! Simply refer to the following guide to make your switch easy and convenient. For assistance, contact any of our team members at 317-852-2268 or stop by any convenient location. We're here to help every step of the way!

TO CLOSE AN ACCOUNT AND TRANSFER ANY REMAINING FUNDS, *YOU WILL NEED*:

⇒ Recent bank statement with your old account number(s)

⇒ **HENDRICKS COUNTY BANK** account number(s)

⇒ **HENDRICKS COUNTY BANK** routing number: 074906091

⇒ Form #1—Account Closing Notification (provided by **HENDRICKS COUNTY BANK**)

⇒ Follow up to ensure all checks have cleared on your old account.

⇒ Double check maturity dates if transferring a Certificate of Deposit in order to avoid possible penalties.

TO CHANGE YOUR PAYROLL OR DIRECT DEPOSIT, *YOU WILL NEED*:

⇒ Recent bank statement with your old account number(s)

⇒ **HENDRICKS COUNTY BANK** account number(s)

⇒ **HENDRICKS COUNTY BANK** routing number: 074906091

⇒ Form #2—Direct Deposit Request (provided by **HENDRICKS COUNTY BANK**)

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TO CHANGE YOUR SOCIAL SECURITY DIRECT DEPOSIT, *YOU WILL NEED*:

⇒ **HENDRICKS COUNTY BANK** account number(s)

⇒ **HENDRICKS COUNTY BANK** routing number: 074906091

⇒ Visti http://www.ssa.gov/deposit/how tosign.htm or call 1-800-772-1213 to change your direct deposit.

TO CHANGE YOUR AUTOMATIC PAYMENT OR WITHDRAWAL, *YOU WILL NEED*:

⇒ Recent statement from vendor

⇒ **HENDRICKS COUNTY BANK** account number(s)

⇒ **HENDRICKS COUNTY BANK** routing number: 074906091

⇒ Form #3—Automatic Payment Request (provided by **HENDRICKS COUNTY BANK**)

⇒ You will need to complete a separate form for each vendor that debits money from your account.

TO MOVE YOUR ONLINE PAYMENTS AND/OR SETUP HENDRICKS COUNTY BANK BILL PAY, *YOU WILL NEED*:

⇒ Recent statement from vendor

⇒ Form #4—**HENDRICKS COUNTY BANK** Payment Checklist (provided by **HENDRICKS COUNTY BANK**)

1 E. Main St., Brownsburg, 317-852-2268 ✪ 11 E. Northfield Drive, Brownsburg, 317-852-6518 ✪ 23 S. County Road 200 E., Danville, 317-745-0501 ✪ 1649 E. Main St., Plainfield, 317-839-2336 ✪ 963 N S.R. 267, Avon, 317-272-7055

Member FDIC

Your Community, Your Bank, Since 1908

EQUAL HOUSING LENDER

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Form 1 ACCOUNT CLOSING NOTIFICATION

Please accept this letter as authorization to close the following account(s) with your institution.

To:

Bank Name _____ Bank Address _____

Bank City _____ Bank State, Zip _____

Account Number _____ ❏ Checking ❏ Savings ❏ Money Market ❏ Other

Account Number _____ ❏ Checking ❏ Savings ❏ Money Market ❏ Other

Account Number _____ ❏ Checking ❏ Savings ❏ Money Market ❏ Other

Account Number _____ ❏ Checking ❏ Savings ❏ Money Market ❏ Other

Please send any remaining funds in the accounts listed to the following address:

HENDRICKS COUNTY BANK AND TRUST COMPANY, 1 East Main Street, Brownsburg, IN 46112-1213

Deposit Instructions:

❏ Deposit entire amount to checking account number: _____ OR

❏ Deposit $_____ to savings account number: _____ AND

The remainder to checking account number: _____

From:

Name _____ Address _____ City _____

State, Zip _____ Telephone Number _____ Social Security Number _____

I Authorize:

❏ The listed entity to close the account(s) listed here.

❏ The transfer of my funds to my **HENDRICKS COUNTY BANK** checking and/or savings account(s) as indicated.

❏ **HENDRICKS COUNTY BANK** to credit deposits to my account(s) as specified.

Signature _____ Date _____

1 E. Main St., Brownsburg, 317-852-2268 ✪ 11 E. Northfield Drive, Brownsburg, 317-852-6518 ✪ 23 S. County Road 200 E., Danville, 317-745-0501 ✪ 1649 E. Main St., Plainfield, 317-839-2336 ✪ 963 N S.R. 267, Avon, 317-272-7055

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Form 2 DIRECT DEPOSIT REQUEST

Please accept this letter as notification that I have established a new checking and/or savings account at **Hendricks County Bank and Trust Company**. I would like my paycheck to be automatically deposited to my **Hendricks County Bank and Trust Company** account according to the instructions below.

To Payroll Department:

Employer/Company Name: _____

From: _____

Social Security #: _____

*Please Attach A **HCBT** Voided Check Here*

Subject: Payroll Direct Deposit:

Date: _____

❏ Establish Direct Deposit

❏ Change my existing Direct Deposit

Deposit Instructions:

❏ Deposit entire amount to checking account number: _____ OR

❏ Deposit $_____ to savings account number: _____ AND

the remainder to checking account number: _____

HENDRICKS COUNTY BANK routing number: 074906091

I Authorize:

❏ The listed employer/company to change deposits of my funds to my **HENDRICKS COUNTY BANK** checking and/or savings account.

❏ **HENDRICKS COUNTY BANK** to credit deposits to my account(s).

❏ This authorization to remain in effect until I send written notice of change or cancellation.

Signature _____ Date _____

1 E. Main St., Brownsburg, 317-852-2268 ✪ 11 E. Northfield Drive, Brownsburg, 317-852-6518 ✪ 23 S. County Road 200 E., Danville, 317-745-0501 ✪ 1649 E. Main St., Plainfield, 317-839-2336 ✪ 963 N S.R. 267, Avon, 317-272-7055

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Form 3 AUTOMATIC PAYMENT REQUEST

Please accept this letter as notification that I have established a new checking and/or savings account at **Hendricks County Bank and Trust Company**. I would like the following to be automatically debited from the **Hendricks County Bank**.

❏ Establish Automatic Payment

❏ Change my existing Automatic Payment

Automatic Payment Information:

Company Name: _____

Company Account #: _____ Payment Amount: _____

Personal Information:

Name: _____ Daytime Phone Number: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Bank Account Information:

Account Type ❏ Checking ❏ Savings

HENDRICKS COUNTY BANK Account # _____

Signature _____ Date _____

HENDRICKS COUNTY BANK routing number: 074906091

I Authorize:

❏ The company listed to initiate withdrawal of my funds from the above HENDRICKS COUNTY BANK account.

❏ HENDRICKS COUNTY BANK to debit funds from my account.

❏ This authorization to remain in effect until I send written notice of change or cancellation.

Signature _____ Date _____