## SWITCHAI



## Make the switch to better banking. It's easy as 1, 2, 3!

Make the move to Michigan Coastal Credit Union in 3 simple steps with our easy switch kit. We look forward to welcoming you to the Michigan Coastal family!

## Open your new Michigan Coastal account.

Open your Michigan Coastal Credit Union account today for a better banking experience. Take the first step with our information-gathering tool on the next page.

2

## Switch your direct deposits & automatic withdrawals.

Use our user friendly forms in this kit to collect all the information you will need to move your automatic transactions to your new MCCU account.

3

### Close your current account.

You are one step closer to making the switch! Just complete the provided form on page 4 to close your account(s) with your current institutions. Keep in mind any remaining account balance(s) can be transferred to your MCCU account(s).







Please fill out the information on this form to collect everything you will need to move your Direct Deposit to your new Michigan Coastal Credit Union account. Complete it either online (then download & print ) or manually, and bring it to our office.

Notification of Direct Deposit Authorization Change				
Company or Employer:				
Address:				
City, State, ZIP:				
Phone Number:				
Employee ID:				
(if applicable)				
Effective immediately, please deposit the net amount of my check to my Michigan Coastal Credit Union account. I authorize (name of depositor) to automatically deposit funds into the account below. This authorization shall remain in place until I have submitted a new authorization, or until this authorization is changed or revoked in writing.				
Place an X next to your de	sired option.			
	ichigan Coastal Credit Union			
Account #		Routing # 272483277		
Net amount to M Account #	ichigan Coastal Credit Union	Routing # 272483277		
Signature:		Date:		
Name:				
Address:				
City, State, ZIP				

#### **Direct Deposit Checklist**

These are the most common direct deposits:

Pay	rol	U
. ~,	-	ч

investments

#### Retirement Plans

**Social Security** 







**Phone Number:** 

# **Automatic Withdrawal Authorization**

Please fill out the information on this form to collect everything you will need to move your automatic withdrawls (ACHs) to your new Michigan Coastal Credit Union account. Complete it online (then download & print) or manually, and bring it to our office. Use this form to authorize a change to any automatic payment, deduction, or withdrawals from your account. Use one form for each automatic withdrawal.

Notification of With	drawl Authorization Change		
Name of Company:			
Account Number:			
<b>Payment Amount:</b>			
Address:			
City, State, ZIP:			
Phone Number:			
Please cancel all automatic withdrawls from my previous institution:			
Financial Institution:			
Account #	Routing #		
Please make all future automatic withdrawls from my new institution:			
Account #	Routing # 272483277		
	main in effect until I have submitted to you a new authorization, or until  me in writing that this authorization has been changed or revoked.		
you have been notified by	y me ni witting that this authorization has been changed of fevored.		
Signature:	Date:		
Name:			
Address:			
City, State, ZIP Phone Number:			
i nono itamboi.			

#### **Automatic Withdrawal** Checklist:

These are some of the most commonnly used automatic payments.

Home Mortgage

**Auto Loans** 

**Utilities** 

**Insurance** 

Cable/Internet

**Gym Memberships** 

**Credit Cards** 

**Investments** 

**Subscriptions** 

**Charity Donations** 







Use this form to gather everything you'll need to close your current account, then have your funds moved to your new Michigan Coastal account.

Complete it either online (then download and print) or manually, and bring it to your current institution to get started.

Upon closing your account at your former financial institution, be sure to verify that any outstanding transactions have cleared. Request that your remaining balance be automatically deposited to your new Michigan Coastal account OR paid to you by check.

Notification of Accou	ınt Closure Authorization	
To Whom It May Concern Financial Institution: Address: City, State, ZIP:		
Please close my account: Account Number:		
Primary Owner: Address:		
City, State, ZIP:		
Please send the remain Place an X next to your de Please deposit of Account #		Coastal Credit Union 272483277
	a check to my address listed below:	Data
Primary Signature: Joint signature:		Date:
Name: Address:		
City, State, ZIP:		
Phone Number:		

#### **Congratulations!**

Now that you've gathered all of the necessary information, you're ready to switch to a truly better banking experience. We look forward to showing you the local difference and personal touch.

Welcome to Michigan Coastal Credit Union! We Borrow Together, Save Together, We Are Family.





