



New Account Conversion Checklist

- ___ Make sure all checks have cleared through your previous checking account.

- ___ Check to be sure enough funds are available in your account to cover any automatic payments that need to be withdrawn.

- ___ If transferring a Certificate of Deposit, double check the maturity date, to avoid possible penalties.

- ___ Notify businesses or organizations that deposit funds into your account (payroll, CD interest payments, etc.). For payroll, you will need to provide your employer with your new account number and the bank routing number (#21310711). Check with your employer, they may have their own forms for completing the process.

- ___ Notify governmental agencies that deposit funds into your account. Many government agencies, including Social Security, allow you to change your direct deposit over the phone. You can do this from home or we can assist you.

- ___ Send notification of your new account information to vendors who automatically take payments from your checking account if you wish to continue automatic withdrawals from your new account. (i.e. utilities, insurance companies, internet service providers, cable companies, credit card companies, etc.). If you are able to do this by phone, supply the vendor with your new account number and the bank routing number (#21310711).

- ___ Notify your previous financial institution that you are closing your account. Local community banks will usually allow you to do this by mail. Regional and national banks may require you close an account in person. If you use the enclosed form, have the funds from your old account sent directly to you, unless you have already opened an account with 1st National.

If you have any questions, please contact 1st National Bank of Scotia (518) 370-7200.

ACCOUNT CLOSING REQUEST

Use this form to request the closing of your account(s) at your current bank.

Date _____

RE: Close My Account(s)

This letter is to inform you that I/we would like to close the accounts listed below. Please close the account(s) and send me/us a check for the remaining balance(s). If you have any questions regarding this request, please do not hesitate to call me/us at the phone number or address listed below.

Account Number(s)	Name	Telephone Number
Address, City, State, Zip		

Signature(s): _____

DIRECT DEPOSIT AUTHORIZATION FORM

Use this form to request a direct deposit to your new 1st National Bank of Scotia account.

Date _____

Employer/Company Name _____ Employer/Company Address _____

Your Name _____ Social Security Number and/or Employer Number _____ Daytime Phone _____

Street Address _____ City, State, Zip _____

New Direct Deposit Information: 1st National Bank of Scotia
201 Mohawk Ave.
Scotia, NY 12302
Routing Number – 021310711

Please deposit my _____ (type of check: payroll, social security, etc.) according to the following:

Account Number: _____ Amount: _____

Authorized Signature(s): _____

AUTOMATIC PAYMENT REQUEST FORM

Use this form to request the transfer of an automatic payment from your 1st National Bank of Scotia account.

Date _____

Name of company debiting my account: _____ Company Account Number: _____

Company Address: _____

Your Name: _____ Street Address (Include city, state, zip): _____

Daytime Phone Number: _____

Please DISCONTINUE withdrawing payments from: _____
Routing Number & Previous Financial Institution Name _____ Previous Financial Institution Account Number _____

Begin making automatic withdrawals from my 1st National Bank of Scotia account effective ____ / ____ / ____ according to the following information:

1st National Bank of Scotia Account Number: _____
201 Mohawk Ave. Date(s) or Frequency of Payment: _____ Amount: _____
Scotia, NY 12302
Routing Number – 021310711

Authorized Signature(s): _____