

SWITCH KIT FORMS LIST

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Account Switch Checklist

You may check the boxes next to the items you've completed (if any), and then keep this checklist handy. As you continue completing items, simply check off the boxes.

- Make sure all checks have cleared on your checking account

- Make certain enough funds are available in your account to cover any automatic payments that are still outstanding

- Check maturity dates of accounts in order to avoid possible penalties

- Send notice to your direct deposit vendors (payroll, social security, CD interest payments, etc.) regarding the change in your banking relationship

- Send notice to your creditors who automatically take your payments from your checking account (utilities, insurance companies, internet service providers, banks, etc.) that you are closing the account and provide new account information

- Send notification of new account information to companies who you want to *continue* to generate automatic withdrawals; or, use the provided form to start a new automatic payment with a company

- Send notice to the financial institution that you are closing the account after all outstanding transactions are posted to your new DCB account

Forms are available in this kit for switching purposes





CUSTOMER PROFILE

Please tell us about yourself:

Customer Name: _____

Address: _____

Mailing Address: _____

Home Phone: _____ Cell Phone: _____

Date of Birth: _____ City of Birth: _____ Security Code Word: _____

Mother's Maiden Name: _____ Social Security Number: _____

Primary ID Type: Number/Issue/Exp Dates: We need Copy of Drivers License: _____

2nd ID: Credit Card Type/Last 4 Digits of Card Number/Issue/ Exp. Date: _____

Email Address: _____

Occupation: _____

Employer: _____ Business Phone: _____

Business Address: _____

Please tell us about your banking needs:

Previous bank? _____

How did you hear about us? _____

What services are you utilizing at your current bank?

Checking Savings CD Invest. MMKT ATM/Debit SDB OD Protection

Direct Dep. Tele Trans. Loans Telephone Banking Internet Banking

What services do you plan to utilize at Desert Commercial Bank? _____

In order to better serve your banking needs:

Should we anticipate any cash transactions?

Incoming: Yes No Outgoing: Yes No

Incoming frequency: _____

Incoming average dollars per transaction: _____

Outgoing frequency: _____

Outgoing average dollars per transaction: _____

Should we anticipate any domestic wire transactions?

Incoming: Yes No Outgoing: Yes No

Incoming frequency: _____

Incoming average dollars per wire: _____

Outgoing frequency: _____

Outgoing average dollars per wire: _____

Should we anticipate any international wire transactions?

Incoming: Yes No Outgoing: Yes No

Incoming frequency: _____

Incoming average dollars per wire: _____

Outgoing frequency: _____

Outgoing average dollars per wire: _____

What are the country(s) of origination and/or destination, list all: _____

Additional comments: _____



BUSINESS PROFILE

Business Name: _____ Phone Number: _____

Employer Identification Number: _____ NACIS: _____

Signer # 1: _____ Title: _____

Signer # 2: _____ Title: _____

Signer # 3: _____ Title: _____

Signer # 4: _____ Title: _____

Business Address: _____

City _____ State: _____ Zip: _____

E-mail address: _____ Fax Number: _____

Type of Business and Description of Company Product/Service: _____

Is your business located in the geographical area of the Bank? Yes No If no, state reason for selecting our Bank: _____

Years in Business _____ Number of Employees _____ Annual Sales \$ _____

% of Average Sales in Cash \$ _____ Express Merchant Deposit Prospect? Yes No

% of Average Sales in Checks \$ _____ Payroll Processor? Yes No

% of Average Sales in Merchant Card \$ _____ Current Processor? _____

Complete for New Customer(s) Only:

Previous bank name? _____

How did you hear about us? _____

What services are you utilizing at your current bank?

- | | | |
|---|---|---|
| <input type="checkbox"/> Basic Checking (Avg Mo Bal): \$ _____ | <input type="checkbox"/> Cash Management | <input type="checkbox"/> Wire Transfer |
| <input type="checkbox"/> Bus Int Checking (Avg Mo Bal): \$ _____ | <input type="checkbox"/> ACH/ Payroll | <input type="checkbox"/> Courier Service |
| <input type="checkbox"/> Analysis Checking (Avg Mo Bal): \$ _____ | <input type="checkbox"/> Merchant Bank Card | <input type="checkbox"/> Coml RE Loan |
| <input type="checkbox"/> Loan/Line of Credit (Line Amt): \$ _____ | <input type="checkbox"/> Letters of Credit | <input type="checkbox"/> Night Depository |

In order to better serve your banking needs:

Return check instructions: _____

Can we expect any international transactions? Yes No If yes, list types of transactions: _____

Should we anticipate any cash transactions? Incoming Yes No Outgoing Yes No

Incoming frequency: _____ Incoming average dollars per transaction: _____

Outgoing frequency: _____ Outgoing average dollars per transaction: _____

Should we anticipate any domestic wire transaction? Incoming Yes No Outgoing Yes No

Incoming frequency: _____ Incoming average dollars per wire: _____

Outgoing frequency: _____ Outgoing average dollars per wire: _____

Should we anticipate any international wire transactions? Incoming Yes No Outgoing Yes No

Incoming frequency: _____ Incoming average dollars per wire: _____

Outgoing frequency: _____ Outgoing average dollars per wire: _____

What are the country(s) of origination and/or destination, list all: _____

Additional comments: _____

Direct Deposit Change Form

Please make any necessary changes to my direct deposit as I have switched depository institutions. My new account is with Desert Commercial Bank.

Type of check / transaction

- | | |
|--|---|
| <input type="checkbox"/> Social Security | <input type="checkbox"/> Employer Payroll |
| <input type="checkbox"/> Supp. Security Income | <input type="checkbox"/> Civil Service Retirement |
| <input type="checkbox"/> V.A. Comp. or Pension | <input type="checkbox"/> Other _____ |

Company Name: _____

Previous Bank of Deposit

Previous Depository Bank: _____

Previous Account #: _____

New Bank Information (please make all future deposits as shown below)

Bank Name: **Desert Commercial Bank**
44801 Village Court
Palm Desert, CA 92260

Routing # **122244003**

Account # _____

Signature: _____

Name (please print): _____

Date: _____



Automatic Payment / Withdrawal Change Letter

Date

Name of company making automatic withdrawal

Address

City, State, Zip

To Whom It May Concern:

Please make any necessary changes to my automatic withdrawal / payment as I have changed depository institutions. Note the changes shown below:

Withdrawal / Payment

Amount: \$ _____

Recurring Date: _____

For credit to (acct./ID #): _____

Previous Bank of Withdrawal

Previous Bank: _____

Previous Account #: _____

New Bank Information (please make all future withdrawals as shown here)

Bank Name: **Desert Commercial Bank**
44801 Village Court
Palm Desert, CA 92260

Routing # **122244003**

Account # _____

If you have any questions about this request, please contact me during the day/evening (circle one) at (_____) (phone number).

Sincerely,

Signature

Name (please print)

Address

City, State, Zip

Account Closing Letter

Date

Financial Institution Name

Address

City, State, Zip

To Whom It May Concern:

Please close my account _____ (account number), and send a check for the remaining balance to me at the address listed below.

If you have any questions about this request, please contact me during the day/evening (circle one) at (_____) _____ (phone number).

Sincerely,

Signature

Co-signer signature

Name (please print)

Co-signer name (please print)

Address

City, State, Zip