UNITED BANK'S BUSINESS

Switch Kit

Welcome to United Bank!

Thank you for choosing United Bank. We're thrilled to have you as a customer and look forward to meeting your needs and exceeding your expectations.

At United Bank, we want to make banking as easy as possible for our business customers. We know you're busy and don't have time to worry about banking. So, our goal is to get you the right products and then back them up with convenience-enhancing tools and superior customer service.

The first step is to get your accounts switched to United Bank and this easy-to-use kit should help.

Your Switch Kit includes:

- 5 Simple Steps for Switching to Your
 New United Bank Business Checking Account
- Switching Worksheet
- Switching Forms
 - Automatic Payment Cancel Form
 - Automatic Payment Switch Form
 - Financial Partner Notification Form
 - Account Closing Request Form
- Switching To-Do List





5 Simple Steps

Switching to Your New Business Checking Account

Call 800.423.7026 if you have questions!



Contact us to register for online banking at 1-800-423-7026.



Follow these easy steps to complete your transfer to United Bank.

2 Stop using your old business account.

Do not close your account or remove all funds until you are certain all outstanding items have cleared and all automatic transactions have been switched to your new account.

Switch automatic and recurring transactions.



You'll need to redirect payments to/from your new United Bank account. If you'd like to send written notice, **an Automatic**Payment Switch form is on page 7.

You will need to compile, notify, and update information with

- Direct deposits into your account from vendors, merchants or financial institutions
- Payments from you to utilities, loans, subscription services, and other vendors
- Update your account information with financial services providers.



These include your bookkeeper, accountant, attorney, payroll company, merchant services provider and any professionals or companies who need your account information.

Close your old business account.

Once you are certain all items have cleared and automatic transactions switched, you should close your old business checking account. We've included an Account Closing Request Form in this kit for your convenience.



Download the **UB BIZ APP**







Switching To-Do List

You can monitor your progress using this handy checklist

Tip

Shred or destroy your remaining unused checks, deposit slips, and debit cards. This will help prevent the accidental use of your old account.

✓ Task	
Open Business Checking Account	Update Info With Payroll Company
Order Checks & Deposit Forms	Update Info With Merchant Services Processo
Enroll in Online Banking	Update Info with
Activate UB Business Debit	Financial Services Providers
	Company / Individual Name
Switch All Automatic Drafts,	0
Deposits and Transfers	
Company Name	
	Update Info with Key Consultants
	Company / Individual Name
0	
0	
	COMPLETE LAST
	COMPLETE LAST
	Verify All Old Checks Cleared
	Destroy Old Checks and Debit Cards
	Close Old Accounts



Switching Worksheet

Use this worksheet to compile the information you need to switch automatic transactions and close your old account.



You'll need to have the following information handy wher adding payees in online banking: **biller name**, **billing address**, **phone number**, **and your account number**.

	Checking Accoun	t Information			Complete within 30 days to minimize
New UB Account #					interruptions
New UB Routing # New UB Business Debit Card #					
Recurring Payments To Yo	ur Account (Credit	ts)			
Company/Payer	Account #	Next Scheduled Payment Date	Amount	Date Payer Notified	First Payment Date to New UB Account
Recurring Payments From	Your Account (Do	hitc)			
Recurring Payments From Company/Payer	Your Account (De	bits) Next Scheduled Payment Date	Amount	Date Payee Notified	New Payment Method (check, debit, credit, online payment)
		Next Scheduled	Amount		New Payment Method (check, debit, credit, online payment)
		Next Scheduled	Amount		New Payment Method (check, debit, credit, online payment)
		Next Scheduled	Amount		New Payment Method (check, debit, credit, online payment)
		Next Scheduled	Amount		New Payment Method (check, debit, credit, online payment)
Company/Payer	Account #	Next Scheduled	Amount		New Payment Method (check, debit, credit, online payment)
	Account #	Next Scheduled Payment Date	Amount ate notified		New Payment Method (check, debit, credit, online payment) Status
Company/Payer Payroll Funding Accounts	Account #	Next Scheduled Payment Date			(check, debit, credit, online payment)





Switching Worksheet (cont)

Switch Merchant Services	Account			
Merchant Services Processor		Date Notified	Status	
I Indate Account Information	on with Financial Services Pro	oviders and Other Prof	fessionals	
Partner/Consultant	on with manetal services inc	Date Notified	Status	
Outstanding Charles from (Old Assoupt			
Outstanding Checks from Check Payable To	Amount	Bank/Account	Date Cleared	
CHECK rayable 10	Amount	Written From	Date Cleared	
Old Account/Accounts to 0	Îlose			
Bank Name	Routing # (9 digits)	Account Type	Account #	Date Closed
	3 (0 /	71		





Switching Forms

These forms will make the switching process easier for you. Make sure you complete all the required information and sign the form before you mail it to the recipient.

Automatic Payment Cancel Form - pg 7

Use this to cancel automatic payments from your account. These could include utility, loan, vendor and subscription payments.

Automatic Payment Switch Form - pg 8

Use this form to switch automatic payments from your old account to your new United Bank account. These could include utility, loan, vendor and subscription payments.

Financial Partner Notification Form - pg 9

This form can be used to update your account information with financial services providers and other professionals such as bookkeepers, accountants, attorneys, payroll companies and merchant services providers.

Account Closing Request Form - pg 10

This form can be used to close your old business banking account after you are certain all items have cleared and automatic transactions switched to your new account.

Please be aware that the institutions, organizations and individuals you are notifying might require additional information or that the request be made in person.



Keep all sensitive information secure and consider shredding any printouts when you complete the process. Caution should be taken when transmitting documentation via email.





Request to Cancel an Automatic Payment

Date	Bank Name	Address		
		City	St	Zip

RF.	CANCEL	JATION	I OF AL	JTOMAT	TIC PAY	MENT
			1 01 / 10	<i>_</i>		1 - 1 - 1 - 1 - 1

Account #: _____

I am withdrawing my authorization for you to deduct any automatic payments that are currently set up for the account number above.

Please change your records, effective immediately, so that my electronic payments to you are stopped from the account below:

Bank Name	Account #	Routing #	Payment Amount

If you have any questions regarding this request, please contact me at the phone number below.

Thank you for your assistance.

Customer Name	Address		
Phone	City	St	Zip





Request to Switch an Automatic Payment

Date	Organization Name	Address		
		City	St	Zip

RE: BANK CHANGE FO	R AUTOMATIC PAYMENT	S	
Account #:			
I currently have my electron	ic payment(s) deducted from t	he following accou	int:
Bank Name	Account #	Account #	
Please change your records, deducted from my UB Bank	effective immediately, so that account.	my electronic payı	ment(s) are now
Bank Name	Account #	Routin	g # Payment Amount

If you have any questions regarding this request, please contact me at the phone number below.

Thank you for your assistance.

Customer Name	Address		
Phone	City	St	Zip





Financial Services Partner Notification

Date	Financial Services Partner	Address		
		City	St	Zip

	INESS CHECKING ACCOUN	TCHANGE			
FOR:					
	ou of the company's recent trans mediately, so that all activities are				
Former Account Information:					
Bank Name	Account #	Ro	Routing #		
New United Bank Account Info	ormation:				
Account #		Routing #			
If you have any questions regardi	ng this request, please contact me	e at the phone numb	per below.		
Thank you for your assistance.					
Customer Name	Address				
Castomer Hame					





Account Closing Request

То			From		
Re: Request to Close Accounts			Date		
			se the following account(s) at your financial institution. All comatic debits and credits to my account.		
Please close the following a	ccount(s):				
Checking Account #					
Authorized Signer					
Authorized Signer					
Checking Account #					
Authorized Signer					
Authorized Signer					
Checking Account #					
Authorized Signer					
Authorized Signer					
Savings/Money Market Account #					
Authorized Signer					
Authorized Signer					
Please issue a check for any name and address:	y remaining	balances	and send it to my attention at the following		
Full Name			Your prompt attention to this matter will be greatly		
Address			appreciated.		
City	St	Zip	Thank you.		



