



Moving Your Money Is Easy!

Thank you for choosing **Pisgah Community Bank** for your banking solutions. There is a lot to think about when moving your accounts, so to make it easy, we've done the thinking for you. We would be happy to sit down with you and help make the process as easy as possible, right down to mailing these forms for you.

The switch is a snap with these easy steps...

☐ **Open Your New Account With Us**

Start by filling out our **Commercial New Account Information Form**. Then begin phasing out your existing account(s). Just leave enough funds for all your remaining checks/payments to clear. Shred your unused checks, debit cards, and deposit slips.

☐ **Merchant Services Form**

Redirect your existing merchant services deposits to your new account. Send the form to your merchant services provider and include your new deposit slip or a voided check with your form.

☐ **Direct Deposit Form**

Redirect your existing direct deposits or initiate a direct deposit to your new account. Send the form(s) to all depositors and include your new deposit slip or a voided check with your form.

☐ **Automatic Withdrawal Form**

Redirect your automatic withdrawals to your new account. Send the form(s) to all companies that you wish to change/add an automatic withdrawal. Remember those that use your old debit card number. **(Remember to use Online Bill Pay to control your payments.)**

☐ **Closed Account Request Form**

Once all outstanding items have cleared your old account and you have moved your direct deposits and automatic withdrawals, complete the Closed Account Request Form and send it to your old bank. They will mail you a check for your remaining balance.

It's that easy! We want your business and we'll work hard to earn it! Relationships are what set us apart from other banks. If you need any assistance, please give us a call or stop in.

Please be prepared to provide Pisgah Community Bank with the following document(s):

State Issued Photo Identification for each signer
Articles of Incorporation for Nonprofit Corporation
Articles of Incorporation
Fictitious Name Registration
Limited Liability Registration

Haven't registered your entity yet? Find forms on our website!

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, and the theft of your identity, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, tax identification number (social security number or employer identification number), date of birth, and possibly other information that will allow us to identify you. We must also ask to see your driver's license or other identifying documents.

In all cases, protection of a customer's identity and confidentiality is our goal.

1089 Hendersonville Rd. | Asheville, NC 28803 | Ph: 828.277.7127 | Fax: 828.277.3403
www.pisgahcommunitybank.com





Commercial New Account Information Form

Sole Proprietorship Limited Liability Company Corporation Club/Organization
 Other _____ (Please State)

Registered Name _____

Physical Street Address _____

City, State, Zip _____

Mailing Address (if different than above) _____

Business Phone _____

Business Fax _____

Federal Tax Identification Number _____

Authorized Signer Information

Please attach a copy of each signer's drivers license and fill out the information below.

Signer 1 Information

Name: _____
Home Phone: _____ Cell Phone: _____
Employer: _____ Occupation: _____
Nature of Business: _____ Work Phone: _____
Mothers Maiden Name: _____ Social Security Number: _____

Signer 2 Information

Name: _____
Home Phone: _____ Cell Phone: _____
Employer: _____ Occupation: _____
Nature of Business: _____ Work Phone: _____
Mothers Maiden Name: _____ Social Security Number: _____

Signer 3 Information

Name: _____
Home Phone: _____ Cell Phone: _____
Employer: _____ Occupation: _____
Nature of Business: _____ Work Phone: _____
Mothers Maiden Name: _____ Social Security Number: _____

I would like to open:

- Regular Business Checking Business NOW Account Premium Business Checking
 Business Money Market Account Business Savings Account Business Certificate of Deposit Account
 I/we are interested in Cash Management for our business.

Please note that all account holders will need to sign an official account form in person at our office as well verify their identity. Upon completion of this form, please email it to ebank@pisgahcommunitybank.com, bring it with you to Pisgah Community Bank, or fax it to 828-277-3403. For your own account security, we will need to photocopy your driver's license(s) or other form of ID, so we can have it on file to accurately identify you in the future. The purpose of this form is to begin the application process. Use additional pages for additional signers. All applications are subject to approval.



Merchant Services Form

Send this form to your current merchant services provider to redirect your deposits to your new account. If you do not currently have merchant services, we will be happy to help you apply.

Date: _____
Merchant Services Provider: _____
Address: _____
City, State, Zip: _____

To Whom It May Concern:

This letter serves as a request to have my merchant services deposits transferred to a different account.

Currently deposited into my account with:

Current Bank: _____
Account Number: _____
Routing Number: _____

Please redirect my merchant services deposit into my new account with:

New Bank: **Pisgah Community Bank**
Account Number: _____
Routing Number: 053112806
Special Instructions: _____

If you have any questions, please don't hesitate to call me at _____. Thank you.

Sincerely,

Signature: _____
Print Name: _____
Company Name: _____
Address: _____
City, State, Zip: _____

Other information that may be needed (SSN, ID#, etc.): _____



Direct Deposit Form

Social Security • Payroll & Commissions • Retirement Plan Dividends • Child Support

Send this form to all of your current direct deposit contacts to redirect your deposits. If you do not currently have direct deposit, start today by filling out the information below, including your new account number, and sending it to your direct deposit contacts. Include your new deposit slip or a voided check with your form.

Date: _____
Depositor's Name: _____
Address: _____
City, State, Zip: _____

To Whom It May Concern:

This letter serves as a request to have my direct deposit transferred into my new account.

Currently deposited into my account with:

Current Bank: _____
Account Number: _____
Routing Number: _____

- Please redirect my direct deposit into my new account with:
 Please set up a new direct deposit into my new account with:

New Bank: **Pisgah Community Bank**
Account Number: _____
Routing Number: 053112806
Special Instructions: _____

If you have any questions, please don't hesitate to call me at 828-277-7127.
Thank you.

Sincerely,

Signature: _____
Print Name: _____
Company Name: _____
Address: _____
City, State, Zip: _____
Other information that may be needed (SSN, ID#, etc.): _____



Automatic Withdrawal Form

Utilities • Internet Service Providers • Loans • Vendors • Account Transfers

Send this form to all companies you currently have automatic withdrawals set up with. Don't forget those that use your old debit card number and automatic payments made online. You may also use this form to set up new withdrawals. **(Remember to use Online Bill Pay to control your payments.)**

Date: _____
Withdrawal Company Name: _____
Address: _____
City, State, Zip: _____

To Whom It May Concern:

This letter serves as a request to have my automatic withdrawal transferred to my new account.

Currently withdrawn from my account with:

Current Bank: _____
Account Number: _____
Routing Number: _____
Payment/Reason For: _____
Date Withdrawn: _____

- Please redirect my withdrawal to my new account with:
 Please set up a new withdrawal from my account with:

New Bank: **Pisgah Community Bank**
Account Number: _____
Routing Number: 053112806
Special Instructions: _____

If you have any questions, please don't hesitate to call me at _____. Thank you.

Sincerely,

Signature: _____
Print Name: _____
Company Name: _____
Address: _____
City, State, Zip: _____



PISGAH
COMMUNITY BANK

Closed Account Request

Date: _____

Old Bank's Name: _____

Address: _____

City, State, Zip: _____

To Whom It May Concern:

Please close the following account # _____ and send me a check for the remaining balance to the address below.

If you have any questions, please don't hesitate to call me at _____. Thank you.

Sincerely,

Signature: _____

Print Name: _____

Company Name: _____

Address: _____

City, State, Zip: _____

Co-Signer Signature: _____

Print Name: _____