



RELIANCE BANK

NEW ACCOUNT CONVERSION CHECKLIST

- Provide us with your personal or business account information along with a valid driver's license or other photo identification.
- Stop using your old account, and let all outstanding checks clear. Be sure to leave enough funds to cover any automatic payments that may yet need to be withdrawn. Use the "please close my account" letter to notify your financial institution that you are closing your account.
- Bring in your unused checks, deposit slips and ATM/Debit cards to be shredded.
- Change any direct deposits, automatic withdrawals and/or automatic payments linked to your old account or debit card. See the automatic transactions checklist below for some common examples of these types of transactions. Use the "payroll direct deposit" and "automatic withdrawal" change form letters to notify the companies.
- Business accounts need to provide the following:
 1. Certificate of Assumed Name
 2. Articles of Incorporation or Partnership Agreement
 3. Federal tax identification number
 4. Non-profit organizations are required to provide a 501C3 Form

AUTOMATIC TRANSACTIONS CHECKLIST

Use this checklist to identify the companies you may need to notify about changing automatic transactions linked to your checking account or debit card.

- Direct Deposit
 - Your employer's human resources department
 - The company handling your retirement or pension payments
 - Social Security Administration

For social security direct deposits changes call: **Social Security Administration at 1-800-772-1213.**

- Anyone who makes automatic withdrawals from your account
 - Mortgage Company
 - Insurance Company
 - Utility Company
 - Phone or Cable Company
 - Health Club Membership
 - Other

For your security, please bring your completed information forms into Reliance Bank and give them to a customer service representative.

Individual CIP

Individual Section			
*For minor applications, please complete the asterisk fields at minimum.			
*Name:		*Date of Birth:	*SSN:
*Address:		*City:	*State:
*Zip:	Home Phone:	Cell Phone:	Work Phone:
Email Address:		Driver's License or State ID#:	
I'm currently <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Disabled. If you are currently retired, unemployed, or disabled, what was your previous occupation?			
Employer's Name:		Occupation:	Years There:
Is your employment seasonal?		If so, which season?	
If you don't live within 25 miles from Reliance Bank, what brought you here?			
Name and phone number of nearest relative not living with you:			
Do you receive all or a portion of your income from a marijuana or hemp related business?			
Is your employer engaged in a marijuana or hemp business?			
ID Verification Questions (Pick 2)			
What's your mother's maiden name?		What is your favorite color?	
What city were you born in?		What is your favorite number?	
What county were you born in?		What is your favorite date?	
Sole Proprietorship Section (complete only if applicable)			
Business Name:			
Address:		City:	State:
Zip:	Mailing Address, if different:	City:	State:
Zip:			
Acknowledgment			
The information in this application is true and complete to the best of my knowledge and belief. I give my permission to Reliance Bank to verify the accuracy of the information provided above by obtaining a consumer credit report from a consumer reporting agency on my behalf.			
Signature: _____		Date: _____	
Internal Use Only (check all applicable items)			
<input type="checkbox"/> Penley ID Verification (minors N/A)	<input type="checkbox"/> OFAC (required for all)	<input type="checkbox"/> Qualifile (required for DDA- minors N/A)	
<input type="checkbox"/> Minor Application	Source & Amount of Initial Funds:	Account Number & Product Type:	

Please close my account

DATE

BANK NAME

ADDRESS

CITY

STATE

ZIP

To Whom This May Concern:

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

If you have any questions about this request, please contact me at the following number:

Phone _____ Day/Evening (circle one)

Sincerely,

SIGNATURE

NAME (PLEASE PRINT)

CO-SIGNER SIGNATURE

CO-SIGNER NAME (PLEASE PRINT)

ADDRESS

CITY

STATE

ZIP

Please change accounts for my payroll direct deposit

DATE

COMPANY MAKING DIRECT DEPOSIT

ADDRESS

CITY

STATE

ZIP

To Whom This May Concern:

I have recently switched banks and would like to change the bank information for my automatic deposit.

Reliance Bank

Routing Number 091918224

Account Number _____

If you have any questions about this request, please don't hesitate to call. Thank you.

Phone _____ Day/Evening (circle one)

Sincerely,

SIGNATURE

NAME (PLEASE PRINT)

ADDRESS

CITY

STATE

ZIP

Please change accounts for automatic withdrawal

DATE _____

COMPANY NAME _____

ADDRESS _____

CITY STATE ZIP

To Whom It May Concern:

I've recently changed banks and signed up with Reliance Bank.

You are currently withdrawing \$ _____ from the following account:

Old bank _____

Routing number _____

Account number _____

For _____

PAYMENT OR REASON

On _____

DATE OF MONTH

Please stop making withdrawals from this account on _____ and start making them from my new Reliance Bank account: _____

DATE

Reliance Bank routing number _____

Reliance Bank account number _____

If you have any questions, please let me know. Thank you.

Phone _____ Day/Evening (circle one)

SIGNATURE _____

NAME (PLEASE PRINT) _____

ADDRESS _____

CITY STATE ZIP