

#### Welcome to Camden National Bank!

Switching should be short, sweet and simple. Here are some helpful tools to get you started:

- 1
- Open your Camden National Bank account and begin banking the way you want.
  - Log in to online banking and sign up for eStatements
  - Download our Apple® or Android™ mobile app
  - Activate your new Camden National Bank Visa® debit card
  - Order new checks
- 2
- Switch your automatic deposits.

Fill out our Automatic Deposit Authorization form for each vendor and your merchant credit card processor to help make the transfer easy.

- 3
- Redirect your scheduled payments.

Use our Automatic Payments Authorization form to help change any payment services or automatic withdrawals. Give copies to all companies who make withdrawals from your account.

- 4
- Close your old account.

Once you've verified that all outstanding checks have cleared and you've moved your scheduled transactions to your new Camden National Bank account, you're ready to close your account. To notify your previous bank, use our Request to Close Bank Account form. Don't forget to destroy unused checks, deposit slips, and debit cards.

Switching has never been easier!

Need assistance? 800-860-8821 info@CamdenNational.com CamdenNational.com



### **Automatic Deposit Authorization Form**

Complete this form and submit it to any company or organization that is automatically depositing funds to your existing business checking account.

To whom it may concern:

This letter is to authorize you to redirect my scheduled deposit to my new Camden National Bank account.

I currently have my deposit automatical	ally deposited to	:				
Bank Name:	Account Number:					
Please transfer this transaction to:						
Camden National Bank 2 Elm Street, Camden, ME 04843 (800) 860-8821						
Routing Number:		Account Number:				
<u>011201458</u>						
authorization is to remain in effect until I Business Name:	sena written not	ice of change or cancellation.				
Signature:		Date:				
Printed Name and Title:		I				
Business Address:		Business Phone Number:				
City:	State:	Zip Code:				
	l l					



## **Automatic Payments Authorization**

Complete this form and submit it to any company or organization that is automatically withdrawing payments from your existing business checking account. Remember, this could take up to two weeks to process. Feel free to make copies of this form if you need to.

#### To whom it may concern:

This letter is to authorize you to redirect my scheduled payment to my new Camden National Bank account.

I currently have my payment automatically withdrawn from: Bank Name: **Account Number:** Please deduct my automatic payment from: Camden National Bank 2 Elm Street, Camden, ME 04843 (800) 860-8821 **Routing Number: Account Number:** 011201458 Please check one: ☐ Immediately ☐ Beginning: Effective: I authorize you to redirect future automated payment withdrawals to Camden National Bank. **Business Name:** Signature: Date: Printed Name and Title: **Business Address:** Business Phone Number: City: Zip Code: State:



## **Transfer Checklist**

Use this checklist to help keep track of the information you need to switch to your new Camden National Bank account.

National Bank acc	count.								
Important inform	ation t	to make swi	tch:						
My new business checking account number:				Routing number:					
My new business	debit	card numbe	er:	Expirat	ion Date:		CSC (3-c	ligit security code):	
Recurring paymer	nts to y	your accoun	t (credits):						
Company/Payer	Acco	ber s	lext cheduled payment	Amou			Payer notified	Date of first payment to your new Camden National Bank account	
Recurring paymer			unt (debits): Next		int	Date	a Payroo	New payment method	
	Num	nber S	ext cheduled /ithdrawal	Amount		Date Payee was Notified		New payment method established (check, debit, credit, online payment)	
Outstanding Chec			Account to	ha Chad	· · · · · · · · · · · · · · · · · · ·			Data Chask Classed	
Checks Payable to Amount Account		Account t	the Check was Written From			Date Check Cleared			
Old Accounts to C	Close:								
Bank Name		Routing	Account Ty						



# **Request to Close Bank Account**

To:				
From:				
Please accept this letter as my written authorize institution. All of my transactions have cleared my account.				
Account Type (Checking, Savings, Debit Card)	Acc	unt or Card Number		
Please forward remaining funds to me at the fo	ollowing ad	ldress:		
Business Address:		Business Phone Number:		
City:	State:	Zip Code:		
Thank you.				
Sincerely,				
Signature:		Date:		
Printed Name and Title:		·		
Co-Signature (if applicable):		Date:		
Printed Name and Title:		I		