

TURN **TEAL.** Move to Bank Better.

Personal Banking

We are committed to making your move to First Security quick and simple. Just follow the steps below, print the forms you need, and you're ready to realize all the benefits of Banking Better.

1

Getting Started

To get started, complete the [New Account Application](#) and [Organizer Worksheet](#) to help gather the information about your new and old checking account, your direct deposits, your automatic payments and bills you pay online.

2

Direct Deposits (Transfer Existing or Establish New)

With today's busy lifestyles, direct deposit can save time and allow easy access to your money. Whether it is your paycheck or other income source such as retirement or social security, knowing that your funds have arrived safely and on time gives you peace of mind.

If you are transferring the direct deposit of your pay from your old checking account or setting it up for the first time, complete the [Direct Deposit Authorization Form](#) and give it to your employer. To establish or transfer direct deposit of other income sources, alternative forms may be required. The initial direct deposit may not occur immediately, so please allow sufficient time for funds to be deposited into your new personal checking account before closing your old account.

3

Automatic Payments (Transfer Existing or Establish New)

Automatic payments are a simple and convenient alternative to writing checks. No more stamps, no need to write checks and no trips to the post office. You can have your recurring bills – such as your auto insurance, cellular phone, and gym membership – automatically deducted from your First Security personal checking account. Simply complete the [Automatic Payment Request](#) and provide that information to the company you want to pay. Please allow sufficient time for your first automatic bill payment to be activated against your personal checking account.

4

Close Your Old Account

Once you have confirmed that your direct deposit has been credited to your new personal checking account and/or automatic bill payments have been deducted from your new personal checking account you should:

- Make sure all outstanding checks have cleared. Close your old account. You can visit the banking center and do this in person or complete the [Account Closing Request](#) and mail it in.
- Destroy all remaining checks, deposit tickets, ATM and debit cards from your old account.

Now that you have already taken the first steps toward Banking Better, you may want to consider transitioning other account relationships you may have. We can help you consolidate your accounts – from investments to retirement to savings – to make managing your finances convenient and easy.

Visit any of our convenient locations or visit us online at www.fsbank.com for more information.





New Account Application

Use this form to get started Banking Better today!

Product

☐ Checking

☐ Savings

☐ Money Market

Account Type _____

Primary Account Holder

Name (first middle last) _____

Street Address _____

Mailing Address _____

E-Mail Address _____

Date of Birth _____ Social Security # _____

Drivers License # _____ State _____ Issued ____/____/____ Expires ____/____/____

Home Phone # _____ Work Phone # _____ Mobile Phone # _____

Employment _____ Type of Business _____

Position _____ How Long Employed _____ Years _____ Months

Secondary Account Holder

Name (first middle last) _____

Street Address _____

Mailing Address _____

E-Mail Address _____

Date of Birth _____ Social Security # _____

Drivers License # _____ State _____ Issued ____/____/____ Expires ____/____/____

Home Phone # _____ Work Phone # _____ Mobile Phone # _____

Employment _____ Type of Business _____

Position _____ How Long Employed _____ Years _____ Months

Customer Authorization

Account Owner (print) _____

Date _____

Account Owner Signature _____

Account Owner (print) _____

Date _____

Account Owner Signature _____

Two pieces of identification are required at account opening. At least one form must be primary. Contact your local First Security Banking Center for questions on other forms of acceptable identification. Banking Center may request additional identification.

Primary Identification: Valid unexpired drivers license, US Government ID, US Military ID, Passport, or Permanent Resident Card, any of which must bear a photograph of the individual.

Secondary Identification: An insurance card, social security card, birth certificate, Student ID, Work ID, Credit/Debit card, voter registration card, police ID, signed W-9, U.S. Visa, Matricula Consular card, Alien ID card.



1 Organizer Worksheet

Use this worksheet to gather all the information you'll need to make your move to First Security simple!

First Security Information

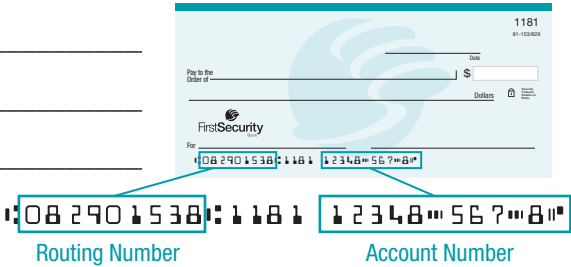
Name and Address _____

Routing/ABA # **082901538** _____

Checking Account # _____

Savings Account # _____

Money Market Account # _____



Previous Bank Information

Bank Name and Address _____

Savings Account # _____

Checking Account # _____

Review your old account and check if you have any of the the following:

<input type="checkbox"/> Direct Deposit (payroll, Social Security, etc.)	<input type="checkbox"/> Automatic Payments (insurance, gym membership, utility payment, etc.)	<input type="checkbox"/> Online Banking/BillPay
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2 Direct Deposit Information

If you have, or wish to have, any deposits from your employer or others directly deposited into your new First Security personal checking account, list them below.

Depositor 1 _____ Depositor 2 _____

Depositor 3 _____ Depositor 4 _____

3 Automatic Payment Information

If you have any payments that you need to set up or transfer to your First Security personal checking account, list them below.

Payee Name	Account #	Payment Amount

2

Direct Deposit Authorization Form

Use this form to request the direct deposit of your pay to your First Security personal checking account. You will need to provide this information to your employer with any other additional information and authorization they need to initiate the deposit. Please contact your employer’s payroll department if you have any questions about their process.

Direct Deposit Authorization (ACH Credit)

I hereby authorize (company name) _____, hereinafter called COMPANY, to make payment of any amount owed to me for compensation by initiating credit entries to my account indicated below at First Security Bank, and I authorize and request First Security to accept credit entries initiated by COMPANY to such account and to credit the same account without responsibility for the correctness thereof. It is understood that in signing this agreement I allow COMPANY to initiate reversal of the described payment entry in the event of error in calculation or overpayment.

Employee Name _____

Social Security # _____

Address _____

City _____ State _____ Zip Code _____

Effective ____/____/____, I authorize the COMPANY to credit my First Security Bank account.

This Direct Deposit Authorization terminates any previous authorization received by the COMPANY from me.

First Security Bank Account Information

First Security Personal Checking Account # _____

First Security ABA Transit Routing # **082901538** _____

*Please remember to attached voided check from your First Security Bank account.

I further understand this authorization may be terminated by me at any time by written notification to my employer or to First Security. Any such notification to my employer shall be effective only with respect to entries initiated by my employer after receipt of such notification and a reasonable opportunity to act on it. Any such notification to First Security shall be effective only with respect to entries credited to my account by First Security after receipt of such notification and a reasonable time to act on it.

Account Owner (print)

Date

Account Owner Signature

Account Owner (print)

Date

Account Owner Signature

3 Automatic Payment Request

Use this form to request the transfer of an automatic payment to your First Security personal checking account, or to establish a new automatic payment. Complete this form for each automatic payment, and attach a voided check from your new First Security personal checking account. Many companies also provide information on how to make a change or establish an automatic payment on their website or on their bill/statement.

Automatic Payment Authorization (ACH Debit)

Date: _____

I am requesting that my payment be automatically deducted from my First Security personal checking account.

Service Provider _____

Account # with this company _____

Effective ____/____/____, I authorize the SERVICE PROVIDER to debit my First Security Bank account in the amount of: \$_____

If possible, please debit my account on the ____ day of each month. This Automatic Debit Authorization terminates any previous authorization received by the SERVICE PROVIDER from me.

Please use the following First Security personal checking account information for my automatic payments.

First Security Personal Checking Account # _____

First Security ABA Transit Routing # **082901538** _____

*Please remember to attached voided check from your First Security Bank account.

If there are any questions regarding this request, please contact me at: _____

Customer Authorization

Account Owner (print) _____

Date _____

Account Owner Signature _____

Account Owner (print) _____

Date _____

Account Owner Signature _____

4

Account Closing Request

Use this form to request that the account(s) you currently have at your former bank be closed and any remaining funds sent to you. Prior to closing your accounts, consult your financial institution to determine if there are any fees associated with closing your account.

To Whom It May Concern: _____ Date: _____

This letter informs you that I/we would like to close the account(s) listed below. Please send a check to me at the address listed below for any remaining funds in the account(s).

If you have any questions regarding this request, please contact me at the phone number or address listed below. Thank You.

Please close the following accounts:

Checking # _____ Account Owner(s) Name _____

Checking # _____ Account Owner(s) Name _____

Savings # _____ Account Owner(s) Name _____

Money Market # _____ Account Owner(s) Name _____

Thank you for processing this request immediately.

Account Owner Signature _____ Date _____

Account Owner Signature _____ Date _____

Mailing Address _____

Phone # _____