Follow the three easy steps below to ensure all of your account transactions are successfully moved to your Peoples Trust Company account.

**Step 1: Review your account activity**
Using the checklist enclosed, take an inventory of any account activity on your account statement that is occurring automatically. This can include automatic payments to any of your payees, and direct deposits from your employer or other company. If you have provided your old routing and account number, you will need to notify these companies of the change.

**Step 2: Complete the Automatic Payment and Direct Deposit Forms**
For each payee charging your account, notify them using the Automatic Payment Change form. Print as many copies of the form as you will need. Send this form to your payee and they will update your account number for future charges. Note: It is recommended you leave your old account open until you have verified the change has been made.

For each company depositing funds to your account, notify them using the Direct Deposit Change form. Print as many copies of the form as you need. Provide this form to your employer and/or any other company making automatic deposits. Note: It is recommended you leave your old account open until you have verified the change has been made. Sometimes the depositing company will contact you for additional documentation.

For new direct deposit requests, complete the Direct Deposit Enrollment form. Provide this form to your employer or other company in order to have funds automatically deposited to your account.

**Step 3: Complete Account Closing and Credit Payoff Request Forms**
The Account Closure Request form will notify your existing financial institution of your intent to close your account(s) and will authorize them to transfer any remaining balances to your new Peoples Trust Company account, or send you a check.

The Credit Payoff Request form can be used to notify and authorize any creditors to use the funds you enclose to pay off and close a credit card, loan, or line of credit.

**Additional products and services**
We would be happy to assist you with transferring IRA assets, opening a Safe Deposit Box, and applying for a personal, residential or commercial loan in order to move these account types to Peoples Trust Company. Please contact an Account Servicing Representative at 802-524-2196 or 800-479-2196, or your personal lender/branch representative to assist you with the necessary steps to facilitate this process.

**Thank You**
Thank you for banking with Peoples Trust Company! If you have any questions or concerns, feel free to contact an Account Servicing Representative or your personal lender/branch representative at 802-524-2196 or toll free at 800-479-2196. We appreciate your business and look forward to serving you for all your banking needs.
### Switch Kit

Your PTC Account Number ________________  PTC Routing Number  011600567

Account Type  ☐ Checking/Money Market  ☐ Savings

<table>
<thead>
<tr>
<th>AUTOMATIC PAYMENT CHECKLIST</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Mortgage/Rent</td>
</tr>
<tr>
<td>☐ Insurance</td>
</tr>
<tr>
<td>☐ Gas/Heat</td>
</tr>
<tr>
<td>☐ Auto Loans</td>
</tr>
<tr>
<td>☐ Credit Cards</td>
</tr>
<tr>
<td>☐ Cable/Dish/TV</td>
</tr>
<tr>
<td>☐ Other debits/transfer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DIRECT DEPOSIT CHECKLIST</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Employee Payroll</td>
</tr>
<tr>
<td>☐ Pension/Retirement Plan</td>
</tr>
<tr>
<td>☐ Investment Income/Other</td>
</tr>
<tr>
<td>☐ Social Security</td>
</tr>
</tbody>
</table>

Contact local Social Security Office at 877-840-5776 or TTY 800-325-0778, or complete Direct Deposit Change form and mail or fax to local office. Fax: 802-658-5635

<table>
<thead>
<tr>
<th>ACCOUNT CLOSING CHECKLIST</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Checking</td>
</tr>
<tr>
<td>☐ Money Market</td>
</tr>
<tr>
<td>☐ Savings Account(s):</td>
</tr>
<tr>
<td>☐ Club Savings: __________</td>
</tr>
<tr>
<td>☐ Certificates of Deposit:</td>
</tr>
<tr>
<td>☐ Other:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CREDIT PAYOFF CHECKLIST</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Credit</td>
</tr>
<tr>
<td>☐ Overdraft Line of Credit:</td>
</tr>
<tr>
<td>☐ Other Line of Credit:</td>
</tr>
<tr>
<td>☐ Personal Loan(s):</td>
</tr>
<tr>
<td>☐ Auto Credit:</td>
</tr>
<tr>
<td>☐ Other Loan(s):</td>
</tr>
</tbody>
</table>
For each automatic payment that is being changed, complete the Automatic Payment Change Request and detach. Provide the completed form to the company that receives your electronic payment.

---

**Automatic Payment Change Request**

**To Company:**
This notice is to inform your company that I am changing the account that should be debited for future automatic payments, effective immediately.

Name: ____________________________  Company Acct Number: ____________________________

**Financial Institution Information**
New Financial Institution: **PEOPLES TRUST COMPANY**  Routing/ABA Number: 011600567
New Account Number: ____________________________  Account Type: □ Checking/Money Market  □ Savings
For reference purposes
Previous Financial Institution: ____________________________  Previous Account Number: ____________________________

Please contact me at the phone number listed below with any questions regarding this change.

______________________________  ____________________________
Signature  Phone Number

---

**Automatic Payment Change Request**

**To Company:**
This notice is to inform your company that I am changing the account that should be debited for future automatic payments, effective immediately.

Name: ____________________________  Company Acct Number: ____________________________

**Financial Institution Information**
New Financial Institution: **PEOPLES TRUST COMPANY**  Routing/ABA Number: 011600567
New Account Number: ____________________________  Account Type: □ Checking/Money Market  □ Savings
For reference purposes
Previous Financial Institution: ____________________________  Previous Account Number: ____________________________

Please contact me at the phone number listed below with any questions regarding this change.

______________________________  ____________________________
Signature  Phone Number
For each direct deposit you wish to change to your new PTC account, complete the Direct Deposit Change Request and forward it to the company that is depositing funds to your account. Note: For Social Security deposits, refer to the checklist for department contact information.

Direct Deposit Change Request

To Company: 

This request is to notify you of a change to my direct deposit account information.

Name: ___________________________  Social Security # _______________________
Address: ___________________________  Employee #, if any: _______________________

_________________________________  Phone # ____________________________

Please update my direct deposit information upon receipt of this request. Below is my new bank account information.

New Financial Institution: Peoples Trust Company  Account Type: 
New Routing Number: 011600567  Checking/Money Market
New Account Number: ___________________________  Savings

For reference purposes

Previous Financial Institution routing number: ___________________________
Previous Account Number: ___________________________

I understand that this authorization will replace any previous, and will remain in full force until I provide written notification to you of its termination, in such time and manner to afford the company and financial institution reasonable opportunity to act on the request.

I have attached a voided check to this form if required.

Please contact me at the phone number listed above with any questions regarding this change.

_________________________________  ____________________________
Signature  Date
Complete this form to request a new direct deposit into your Peoples Trust Company account. Attach a voided check and provide the form to your employer or company to initiate automatic deposits. *For Social Security deposits, please see an Account Servicing Representative to complete the Go Direct Enrollment form.

## Direct Deposit Enrollment Request

**To Company:**

I hereby request and authorize the above company to initiate automatic deposits to my account at Peoples Trust Company. I acknowledge that the origination of these entries must comply with U.S. Law.

### Personal Information

- **Name:** ____________________________  
  **Social Security #** __________________

- **Address:** ____________________________  
  **Employee #, if any:** __________________

- **Phone #** ____________________________

### Type of Deposit

- [ ] Payroll  
- [ ] Retirement/Annuity  
- [ ] Dividend  
- [ ] Other: ____________________________  

  **Excluding Social Security**

### Account Information

- **Financial Institution:** Peoples Trust Company  
- **Account Type:**
  - [ ] Checking/Money Market  
  - [ ] Savings

- **Routing Number:** 011600567

- **Account Number:** ____________________________

A voided check is attached to this request.

I understand that this authorization will remain in full force until I provide written notification to you of its termination, in such time and manner to afford the company and financial institution reasonable opportunity to act on the request.

Please contact me at the phone number listed above with any questions regarding this request.

**Signature** ____________________________  
**Date** ____________________________
Complete this form to request a new direct deposit into your Peoples Trust Company account. Attach a voided check and provide the form to your employer or company to initiate automatic deposits. *For Social Security deposits, please see an Account Servicing Representative to complete the Go Direct Enrollment form.

**Direct Deposit Enrollment Request**

**To Company:** ____________________________

I hereby request and authorize the above company to initiate automatic deposits to my account at Peoples Trust Company. I acknowledge that the origination of these entries must comply with U.S. Law.

**Personal Information**

Name: ____________________________  Social Security # __________________

Address: ____________________________  Employee #, if any: __________________

Phone #: ____________________________

**Type of Deposit**

- [ ] Payroll
- [ ] Retirement/Annuity
- [ ] Dividend
- [ ] Other: ____________________________

Excluding Social Security

**Account Information**

Financial Institution: **Peoples Trust Company**  Account Type:

Routing Number: **011600567**  [ ] Checking/Money Market

Account Number: ____________________________  [ ] Savings

A voided check is attached to this request.

I understand that this authorization will remain in full force until I provide written notification to you of its termination, in such time and manner to afford the company and financial institution reasonable opportunity to act on the request.

Please contact me at the phone number listed above with any questions regarding this request.

Signature ____________________________  Date ____________________________
For each account you wish to close, complete the Account Closure Request and detach. Provide the completed form to your current financial institution.

---

**Account Closure Request**

**To Financial Institution:** ____________________________  **Date:** ____________

I request that my account listed below be closed, and any remaining funds sent by check to:

☐ Me, at the address listed below  ☐ Peoples Trust Company FBO [my name]. Please reference my new account number in the Memo Area. The bank address is listed below.

My Name & mailing address: ___________________________________  **Acct Number:** ____________________________

☐ Close upon Receipt  ☐ Close at Maturity

**New Financial Institution Information**

New Financial Institution: **PEOPLES TRUST COMPANY**

Mailing address: P.O. BOX 320

ST ALBANS, VT 05478

New Account Number: ____________________________

Please contact me at the phone number listed below with any questions regarding this request.

__________________________  ____________________________

Signature  Phone Number

---

**Account Closure Request**

**To Financial Institution:** ____________________________  **Date:** ____________

I request that my account listed below be closed, and any remaining funds sent by check to:

☐ Me, at the address listed below  ☐ Peoples Trust Company FBO [my name]. Please reference my new account number in the Memo Area. The bank address is listed below.

My Name & mailing address: ___________________________________  **Acct Number:** ____________________________

☐ Close upon Receipt  ☐ Close at Maturity

**New Financial Institution Information**

New Financial Institution: **PEOPLES TRUST COMPANY**

Mailing address: P.O. BOX 320

ST ALBANS, VT 05478

New Account Number: ____________________________

Please contact me at the phone number listed below with any questions regarding this request.

__________________________  ____________________________

Signature  Phone Number
For each loan or credit card account you wish to pay off and close, complete the Credit Payoff Request and enclose a check for the balance owed. Forward this form to the company that services your account.

**Credit Payoff Request**

**To Company:** _____________________________  **Date:** ________________

Enclosed you will find a check for the balance of my account. Please use these funds to pay off my account with your company.

- [ ] Credit Card  - [ ] Loan - Loan Type: ____________________________
- [ ] Line of Credit  - [ ] Other: ____________________________

**Account Number:** __________________________________________

**Payoff Amount:** $________________________  **Payoff Date:** ________________

**Account Name(s):** __________________________________________

Please contact me at the phone number listed below with any questions regarding this payoff request.

____________________________________________________________

**Signature**  

____________________________________________________________

**Phone Number**

Please send receipt of my account closure/payoff to me at the address below:

**Name:** __________________________________________

**Address:** __________________________________________

____________________________________________________________