Getting Started

Making the switch to better banking today!

You can make the move to Envista Credit Union in three easy steps. Everything you'll need is provided in this handy Switch Kit. We can't wait to welcome you to Envista, where you'll enjoy a better experience for all your banking needs!

1

Open your new account.

Apply online in minutes or visit your local branch to open your new Envista Credit Union account(s).

2

Switch your direct deposits and automatic withdrawals.

If you have any automatic transactions, use the provided forms to seamlessly switch them to Envista.

3

Close your old account.

Now you're ready to switch. Simply fill out the provided form to close your old account. Any remaining account balance will be transferred to Envista.





Direct Deposit Authorization

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

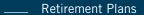
Use this form to authorize your employer, retirement and pension funds, or any other agency to deposit your payment directly into your Envista Credit Union account. Use one form for each direct deposit.

Notification of Direct Deposit Authorization Change				
Company or Employer:				
Address:				
City, State, Zip:				
Phone Number:				
Employee ID: (if applicable)				
Effective immediately, pl	ease deposit the net ar	nount of my check t	o my Envista account.	
I authorize (name of dep	ositor)			
to automatically deposit	funds into the account	below. This authoriz	zation shall remain in	
place until I have submit	ted a new authorization	n, or until this autho	rization is changed or	
revoked by me in writing.				
Place an X next to your de	sired option.			
Net amount	to Envista CHECKING			
Account #		Routing #	301179902	
Net amount	to Envista SAVINGS			
Account #		Routing #	301179902	
Signature:			Date:	
Name:				
Address:				
City, State, Zip:				
Phone Number:				

Direct Deposit Checklist:

Use this list to remember all your direct deposits you need to transfer. These are the most common direct deposits.

Investment



____ Social Security





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Automatic Withdrawal Authorization

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize a change to any automatic payment, deductions, or withdrawals from your account. Use one form for each automatic withdrawal. Or, many companies and agencies make it easy to change your account on record online on their website.

		ange
Name of Company:		
Account Number:		
Payment Amount:		
Address:		
City, State, Zip:		
Phone Number:		
Please cancel all automat	ic withdrawals from my old institution:	
Financial Institution:		
Account #	Bank Routing #	
Please make all future au	tomatic withdrawals from my new institutio	n:
Financial Institution:	Envista Credit Union	
Account #	Bank Routing #	301179902
	nin in effect until I have submitted to you a ne ne in writing that this authorization has been	
Signature:		Date:
Name:		
Address:		
City, State, Zip:		
Phone Number:		

Automatic Withdrawal Checklist:

Use this list to remember all your automatic payments you need to transfer. These are some of the most commonly used automatic payments.

 H	lome	N	lor	tgage

$\Lambda \cup + \Delta$	Loans
AIIIO	II OALIS

			es

____ Insurance

____ Cable/Internet

____ Gym/Club Memberships

____ Credit Cards

____ Investments

___ Subscriptions

__ Charity Donations





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Account Closure Authorization

You can authorize your remaining balance to be deposited automatically to your new Envista Credit Union account(s) or paid by a check forwarded to your mailing address.

Use this form to close your account(s) at your former financial institution. Be sure to verify any outstanding items have cleared your old account.

Notification of Account Closure Authorization				
To Whom It May Conce	rn:			
Financial Institution:				
Address:				
City, State, Zip:				
Please close my accoun	nt:			
Account Number:	Primary Owner:			
Address:				
City, State, Zip:				
	sit directly to my new account at Envista Credit Union.			
Account #	Routing # 301179902			
Please forwa	ard me a check to my address listed below.			
Primary Signature:	Date:			
Joint Signature:				
Name:				
Address:				
City, State, Zip:				
Phone Number:				

Congratulations!

You had to sign your name a few times...but submitting these forms completes your switch to a truly better banking experience. We can't wait to show you the difference a local partner makes.

Welcome to Envista Credit Union!



