

Bogota Savings Bank

Small enough to know you, strong enough to serve you well!

Here Is Your Bogota Savings Bank “Switch Kit”

**Your “Switch Kit” Contains
everything you will need to
transfer accounts to
Bogota Savings Bank.**

This kit includes:

- **Instructions**
- **Account Close and Transfer Request Forms**
- **Direct Deposit Change Form**
- **Automatic Payment Change Form**

**Visit us on the web at
www.bogotasavingsbank.com**

Telephone 201-862-0660

Bogota Branch	Teaneck Branch
60 East Main St	819 Teaneck Rd
Bogota NJ 07603	Teaneck NJ 07666
Fax: (201)489-4611	Fax: (201)862-0599

24 Hour Drive Up ATMs

24/7/365 On Line Banking

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With our Switch Kit, changing banks is a smooth and easy process. Our Switch Kit includes everything you need to transfer funds to your new account at Bogota Savings Bank.

To begin the process, just follow the following steps (if applicable):

Step 1: Visit either of our convenient locations to open an account. The information below is required to open an account and begin the “switch” process:*

- Valid driver’s license or other photo ID
- Second form of identification
- Account to be switched information
- Information regarding existing automatic payments
- Information regarding existing direct deposits

Step 2: If you are switching a checking account, discontinue writing checks on that account. Be aware of any outstanding items, including automatic debits. Make sure to leave enough funds in the account to cover any outstanding items. Destroy any unused checks, deposit slips and ATM/debit cards.

Step 3: If you are receiving direct deposit, complete the direct deposit change form and send to any entity you receive direct deposit from. In order to ensure the funds will be routed to your new Bogota Savings Bank checking account, enclose a voided check from your new account.

Step 4: If you are having automatic payments (debits) taken from your account , complete the automatic payment change form. In order to ensure the funds will be debited from your new Bogota Savings Bank checking account, enclose a voided check from your new account for each entity that debited your old account .

Complete Steps 3 and 4 before proceeding with Step 5

Step 5: Close your old checking account by completing and submitting the closure form and fax or mail to your old bank. Do not complete this step until all outstanding items have been paid.

*** For added convenience—we will come to you! Call for details!**

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In order to complete the change forms you will need to provide Bogota Savings Banks routing number and your new account number(s). This information is printed on your checks.

Joe Smith 1234
1234 Anystreet Court
Anycity, AA 12345

Pay to the order of _____

_____ Dollars

Bogota Savings Bank

⑆ 221270198 ⑆ 123456789123 ⑆ 1234

Routing Number	Account Number	Check Number

The routing number depicted above is Bogota Savings Bank's

Bogota Savings Bank

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Complete one copy of this form for each entity that processes automatic withdrawals / payments from your old account. Mail the completed form to the entity . This form will serve as notification of the switch of your account(s) to Bogota Savings Bank and to redirect activity to your new account(s).

AUTOMATIC PAYMENT CHANGE FORM

Entity Name _____

Address _____

City _____ State _____ Zip _____

You are currently withdrawing \$ _____ from the referenced account below:

Bank Name: _____

Routing Number: _____

Account Number: _____

On or around this date: _____

Discontinue withdrawals from this account on this date: _____

Begin withdrawals from the account referenced below on this date: _____

Bank Name: **Bogota Savings Bank**

Routing Number: **221270198**

Account Number: _____

Please do not hesitate to contact me if you have any questions. Thank you.

Very truly yours,

Signature _____

Name _____

(Please Print)

Address _____

City _____ State _____ Zip _____

Phone _____ Day _____ Evening _____

Date _____





Complete one copy of this form for each entity that processes automatic credits to your old account. Mail the completed form to the entity . This form will serve as notification of the switch of your account(s) to Bogota Savings Bank and to redirect activity to your new account(s).

AUTOMATIC DEPOSIT CHANGE FORM

Entity Name _____

Address _____

City _____ State _____ Zip _____

You are currently crediting \$ _____ to the referenced account below:

Bank Name: _____

Routing Number: _____

Account Number: _____

On or around this date: _____

Discontinue credits to this account on this date: _____

Begin credits to the account referenced below on this date: _____

Bank Name: **Bogota Savings Bank**

Routing Number: **221270198**

Account Number: _____

Please do not hesitate to contact me if you have any questions. Thank you.

Very truly yours,

Signature _____

Name _____

(Please Print)

Address _____

City _____ State _____ Zip _____

Phone _____ Day _____ Evening _____

Date _____



Bogota Savings Bank

Small enough to know you, strong enough to serve you well!

Complete one copy of this form for each entity that processes a direct deposit to your old account. Mail the completed form to the entity . This form will serve as notification of the switch of your account(s) to Bogota Savings Bank and to redirect activity to your new account(s).

Please attach a voided check to this form to ensure recording of the proper routing and account numbers.

DIRECT DEPOSIT CHANGE FORM (other than Federal Benefit Payments*)

Entity Name: _____

Address: _____

City: _____ State: _____ Zip: _____

You are currently crediting my _____ (Type : i.e. pay check, dividend etc) to the following account:

Bank Name: _____

Routing Number: _____

Account Number: _____

Begin crediting this direct deposit into the account referenced below on: _____

Bank: **Bogota Savings Bank**

Routing Number: **221270198**

Account Number: _____

Please do not hesitate to contact me if you have any questions. Thank you.

Very truly yours,

Signature _____

Name _____

(Please Print)

Address _____

City _____ State _____ Zip _____

Phone _____ Day _____ Evening _____

Date _____

(*For Federal Agency Contact info, see next page)



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How to contact Social Security Administration (SS and SSI), Department of Veterans Affairs, Department of Labor, Office of Personnel Management, Railroad Retirement Board online:

http://www.godirect.gov/Signup/How_do_I_Change.cfm?



GO direct

- FAQ
- Sign Up
- Events
- Media
- Partners
- About

How do I change my direct deposit?

You can use *Go Direct* only if you currently receive your Federal benefit payments by check and you want to begin receiving your benefits by Direct Deposit instead. If you are already receiving your Federal benefit payment by Direct Deposit, and would like to have your payments sent to a new or different account, you should call the Federal agency that pays your benefits.

You may click on the agency listed below or scroll down for more information.

- [Social Security Administration \(SS and SSI\)](#)
- [Department of Veterans Affairs](#)
- [Department of Labor](#)
- [Office of Personnel Management](#)
- [Railroad Retirement Board](#)

For all other types of federal benefit payments, please contact the respective paying agency directly for information about changing your direct deposit.

 **Social Security Administration**

How do I change my direct deposit?



[Social Security Administration \(SS and SSI\)](#)

http://www.godirect.gov/Signup/How_do_I_Change.cfm?CFID=3222392&CFTOKEN=74414281#SA

[Department of Veterans Affairs](#)

http://www.godirect.gov/Signup/How_do_I_Change.cfm?CFID=3222392&CFTOKEN=74414281#VA

- [Department of Labor](#)

http://www.godirect.gov/Signup/How_do_I_Change.cfm?CFID=3222392&CFTOKEN=74414281#OL

- [Office of Personnel Management](#)

http://www.godirect.gov/Signup/How_do_I_Change.cfm?CFID=3222392&CFTOKEN=74414281#PM

- [Railroad Retirement Board](#)

http://www.godirect.gov/Signup/How_do_I_Change.cfm?CFID=3222392&CFTOKEN=74414281#RB

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Small enough to know you, strong enough to serve you well!

Complete one copy of this form for each entity where you have accounts that you want closed. Mail the completed form to the entity along with passbooks (if appropriate) and or other proof of account(s) on deposit that are to be closed.

ACCOUNT CLOSURE FORM

Bank Name _____

Address _____

City _____ State _____ Zip _____

I (we) request to close the following account(s) # _____

_____ # _____

Send me the proceeds in the form of a check payable to:

Please do not hesitate to contact me if you have any questions. Thank you.

Very truly yours,

Signature _____

Name _____

(Please Print)

Address _____

City _____ State _____ Zip _____

Phone _____ Day _____ Evening _____

Date _____

Bogota Savings Bank

Small enough to know you, strong enough to serve you well!

Complete one copy of this form for each entity where you have accounts that you want transferred to Bogota Savings Bank. Mail the completed form to the entity along with passbooks (if appropriate) and or other proof of account(s) on deposit that are to be transferred to Bogota Savings Bank.

ACCOUNT TRANSFER FORM

Bank Name _____

Address _____

City _____ State _____ Zip _____

I (we) request to close the following account(s) # _____

_____ # _____

And transfer the proceeds in the form of a check payable to:

Bogota Savings Bank

Street _____

City _____ State _____ Zip _____

Please do not hesitate to contact me if you have any questions. Thank you.

Very truly yours,

Signature _____

Name _____

(Please Print)

Address _____

City _____ State _____ Zip _____

Phone _____ Day _____ Evening _____

Date _____

