



6748 Madison Street, PO Box 468, New Tripoli, PA 18066 – 610-298-8811
7747 Claussville Road, Orefield, PA 18069 – 610-395-8834
4892 Buckeye Road, Emmaus, PA 18049 – 610-421-4001

Welcome to New Tripoli Bank and thank you for the confidence you have in us.

Our Switch Kit provides:

- Five easy steps to move your accounts to New Tripoli Bank
- An Automatic Deposit Authorization Form
- An Automatic Payment Change Authorization Form so your payment can be deducted from your New Tripoli Bank Checking Account
- A Request Form giving authorization to your current financial institution to close your account

Step 1: Open a checking account with New Tripoli Bank

- [Click here to view the types of checking accounts we have to offer](#) and choose the account that is right for you. You can [apply online](#) or visit one of our locations and one of our knowledgeable and friendly customer service representatives will assist you.

Once your account is established be sure to take advantage of the many FREE services New Tripoli Bank has to offer, such as a Visa® Check Card, Online Banking and Bill Pay, Overdraft Protection and 24 hour Telephone Banking with Dial-A-Bank. You will be able to link a savings or money market account to your checking for Overdraft Protection.

Step 2: Start using your New Tripoli Bank checking account and discontinue use of your old checking account.

Step 3: Complete the Automatic Deposit Authorization form in this kit for automatic deposits.

- Attach a voided New Tripoli Bank check to the Automatic Deposit Authorization form. Remember to contact the appropriate companies to determine when your automatic deposit will begin going into your new checking account. Types of automatic deposits are payroll, pension/retirement plans and investment incomes.
- **For Social Security Direct Deposit**, please call the Social Security Administration at 800-772-1213 and request direct deposit of your benefits. A Social Security Administration representative will need to know the account number and the routing number from your New Tripoli Bank check; so be sure to have it with you when you call. You may also visit them online at www.socialsecurity.gov/deposit.

Step 4: Remember to change any automatic payments or withdrawals from your old account to your New Tripoli Bank checking account.

- Types of automatic payments could be utilities, insurances, subscriptions, and loan payments. Remember to include any payments where you used your old debit card account number. Simply complete an Authorization to Change Automatic Payments form in this kit for each payee. If you were using Online Bill Pay with your old bank you will need to delete any recurring payments and reestablish your payees using New Tripoli Bank's FREE Online Bill Pay service.

Step 5: Close your old account.

- Once all your checks have cleared your old account and any authorized debits and credits are processed to your New Tripoli Account complete the Request to Close Account form in this kit and forward it to your old bank. If you have a remaining balance in your old account you may choose to have a check mailed directly to you or ask them to send a check to us and we will deposit it into your New Tripoli Bank checking account.

Be sure to fill out the authorization forms completely. If you have any questions or concerns about the information you are providing, please [contact us](#) for assistance.

*You are responsible for the accuracy of the information you provide and for mailing the letters to the affected contacts. New Tripoli Bank has no control over the amount of time it will take for the affected contacts to process your request therefore an interim payment plan will be necessary.



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Automatic Deposit Authorization

-----Payroll/Pension-----

To: _____
Company Name/Employer

I hereby authorize my automatic deposit to be transferred to my New Tripoli Bank account. Information pertaining to my account is listed below.

Bank Name New Tripoli Bank

Routing/ABA Number 031312796

Account Number _____

Type of Account _____Checking _____Savings _____Money Market

_____ Please deposit my funds into the above account.

_____ Please deposit only the amount noted here into the above account.
Amount

The following information and signature can be used as authorization for this direct deposit, or to contact me with any questions.

Name (First, Middle, Last) _____

Street Address _____

City _____ State _____ Zip _____

Daytime Phone Number _____

Social Security Number _____

Employee Number (if applicable) _____

Signature _____ Date _____

Remember to affix a voided New Tripoli Bank check before mailing the completed form to the appropriate company.



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Request to Close My Account

I/We hereby request that you close the following bank account(s) I/we maintain with you:

Bank Name _____

Account Number _____ Type of Account _____

Account Number _____ Type of Account _____

Account Number _____ Type of Account _____

Please send all remaining funds in the account(s) by check to:

_____ New Tripoli Bank, 6748 Madison St., P O Box 468, New Tripoli PA 18066

Account number _____

Please reference my name and account number on the check

_____ me/us at the address show below

Primary Account Holder Signature

Date

Secondary Account Holder Signature

Date

Street
Address _____

City _____ State _____ Zip _____

Daytime Phone Number _____

Member FDIC



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Authorization to Change Automatic Payments

This is authorization for you to redirect future automatic payments from my previous checking account to my New Tripoli Bank checking account. Please find the necessary information to complete this request below:

Company Name _____

Account Number (if applicable) _____

Customer Name _____

Customer Street Address _____

City _____ State _____ Zip _____

Daytime Phone Number _____

Effectively immediately, all future automatic payments, are to be taken from my New Tripoli Bank checking account.

Bank Name New Tripoli Bank

Routing/ABA Number 031312796

Account Number _____

Please discontinue making payments from my previous account

Previous Financial Institution _____

Routing/ABA Number _____

Account Number _____

Signature _____ Date _____

Member FDIC

Print Form