

Switch Automatic Payments



Date

(Payee) Name of insurance company, mortgage provider, utility company, any payee that automatically debits payments from your account

Address

City State Zip

To Whom It May Concern:

You are debiting my _____ (payee) payment from my current bank account(s):

Current Bank Information

Bank Name _____ Routing number _____
Account number _____

*Please stop debiting from this account on _____, 20__ and start debiting this payment from my new account at **First State Bank**.*

New Bank Information:

First State Bank routing number: 071921532
First State Bank checking account number: _____

Please send me confirmation indicating when this change takes effect. If you have any questions regarding this request please contact me.

Sincerely,

Customer Signature

Address

Print Name

City State Zip

Account number with payee

Phone Number

Email Address