



SWITCH

We make it easy!

Bank of Granite

— SERVICE AS SOLID AS OUR NAME —

Simple Steps

Everything you need to switch your accounts to Bank of Granite.

1. A change of automated payments / direct deposit form
2. An account balance worksheet for previous accounts
3. An account closing authorization form

Simply remove the forms and return them to your previous bank.

Included is an application form for GraniteOnline Banking & Bill Pay.

If you have any questions feel free to call us at: 828/496-2000



Transfer



Change of Automated Payments / Direct Deposit

If you used automated payments with your previous checking account, it is important for those companies to know that your account is now with Bank of Granite. You should complete and mail a copy of this form to each of those companies. Your employer should also receive a copy of this form if you utilized direct deposit with your previous checking account. To ensure accuracy, attach a voided check and include the account number.

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Change of Automated Payments / Direct Deposit

I authorize you to redirect my automated payment currently being charged to my account at _____
Financial Institution
and payable to _____ and begin charging it to my new account at Bank of Granite.
Utility, Creditor, Merchant etc.

I authorize you to redirect my direct deposit currently going to _____ to my new
Financial Institution
account at Bank of Granite.

My account number with company: _____

Description of payment or direct deposit: _____

My new account number is shown
on the attached voided check.

Signature: _____

Date: _____

Telephone: _____

Attach a VOIDED check from your
Bank of Granite checking account here.

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Balance



Account Balance Worksheet

It is important to balance your previous checking account before you close it. This worksheet will help you balance your checkbook register with the balance shown on your most recent bank statement. The reconciled amount is the available deposit for your new Bank of Granite account.

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Account Balance Worksheet

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1. Write the account balance shown on your checking statement.

\$
Last statement balance

2. List deposits that do not appear on your statement.
Include interest earned and deposits made through ATMs and direct deposits.

<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<i>Date</i>	<i>Amount</i>	<i>Date</i>	<i>Amount</i>	<i>Date</i>	<i>Amount</i>

\$
Total deposits

3. Subtotal by adding steps 1 and 2.

\$
Total balance + deposits

4. List outstanding checks, transfers or withdrawals not appearing on your statement.
Include any debit card purchases, ATM withdrawals, automated payments and fees.

<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<i>Date / Check #</i>	<i>Amount</i>	<i>Date / Check #</i>	<i>Amount</i>	<i>Date / Check #</i>	<i>Amount</i>

\$
Total outstanding debits

5. Subtract step 4 from step 3. This should match your checkbook register balance.

\$
Checking account balance

Close

Account Closing Authorization

This form authorizes your previous bank to close your account and allows you to deposit the balance into your new Bank of Granite account. This form should be signed and mailed to your previous bank.



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Account Closing Authorization

Dear Sir or Madam:

Please close my account indicated below effective ____/____/____

Name(s) on Account: _____

Type of Account: _____ Account Number: _____

No disbursement of funds is necessary.

The account balance is zero. I have deposited a check for the balance to my new institution.

Disbursement of funds is necessary. Prepare a cashier's check for the balance of my account payable to:

Names on account, and mail to: _____

Bank of Granite Bank for the benefit of: _____

To be deposited into account number: _____

Type of account: Checking Savings

Please include my Social Security number (print SSN here): _____

and the above account number on the check and mail to:

Please stamp or print
Bank of Granite office address here

Signature: _____ Date: _____

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Convenience



GraniteOnline Banking & Bill Pay Application

Start saving time and hassle with our GraniteOnline Banking Service. Get balance amounts, transfer funds from one account to another, pay your bills online and on time, and more. The following form is an application for GraniteOnline and Bill Pay.

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GraniteOnline Banking Application

Type of Account: Consumer Business

Name(s) on Account Holder(s) Name: _____

SSN or Federal Tax ID: _____ E-Mail Address: _____

Home Phone: _____ Business Phone: _____

Current Address: _____

Check **All Accounts** to access all of your accounts or check **Specific Accounts** and indicate Account #(s) and Account Types

All Accounts (Includes all accounts you have with Bank of Granite, including accounts closed during the current business year.)

Specific Accounts

Account #: _____ Type: _____

Account #: _____ Type: _____

Account #: _____ Type: _____

YES, I want Bill Payment NO, I do not want Bill Payment

PLEASE READ BEFORE SIGNING

I certify that the information provided is true and correct. I authorize Bank of Granite to verify any information included in this application and allow access to all accounts I may be a signer on listed above. The use of GRANITE ONLINE shall be governed by the printed terms and conditions of the GRANITE ONLINE AGREEMENT AND DISCLOSURES and such other terms and conditions or amendment thereto, as may be established by Bank of Granite and communicated in writing to me.

The Undersigned agrees to the same terms stated on the above,

Signature: _____ Date: _____

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Simplicity



Bank of Granite offers eStatements: an electronic version of your paper statement delivered to your email inbox. The free eStatements service eliminates paper storage hassles and allows you to save your statements electronically and view, print, and send them at your convenience. To sign up for this service, please complete the eStatements Application and Agreement.

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eStatement Application and Agreement

Type of Account: Consumer Business

Account Holder(s) Name: _____ SSN or Federal Tax ID: _____

Home Phone: _____ Business Phone: _____

Current Address: _____

eSTATEMENT REQUIRED INFORMATION

I understand that eStatements will replace paper statements and I may no longer receive paper statements unless a request is submitted in writing to discontinue eStatements and resume paper statements.

List all accounts you would like eStatements mailed to you Types - Checking Accounts Only

Account #: _____ Password: _____ E-mail: _____

Account #: _____ Password: _____ E-mail: _____

Account #: _____ Password: _____ E-mail: _____

PLEASE READ BEFORE SIGNING

I certify that the information provided is true and correct. I authorize Bank of Granite to verify any information included in this application and allow access to all accounts I may be a signer on listed above. The use of GRANITE eSTATEMENTS shall be governed by the printed terms and conditions of the GRANITE eSTATEMENTS AGREEMENT AND DISCLOSURES and such other terms and conditions or amendment thereto, as may be established by Bank of Granite and communicated in writing to me. I understand that eStatements will replace paper statements and I may no longer receive paper statements unless a request is submitted in writing to discontinue eStatements and resume paper statements.

The Undersigned agrees to the same terms stated on the above,

Signature(s): _____ Date: _____

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