



The Bath State Bank

OPEN YOUR ACCOUNT

Thank you for choosing Bath State Bank. Please help us meet your needs by taking a few moments to complete the following information.

Name: _____ Social Security Number _____

Date of Birth (mm/dd/yyyy) _____

Drivers License Number _____ State _____ Exp. Date _____

Street Address (required) _____ PO Box _____

City _____ State _____ Zip _____ Rent _____ Own _____

Years at Current Residence (*Note: If less than 1 year, please provide previous address.*) _____

Previous Address _____

Home Phone (Area Code) _____ Cell Phone/Pager (Area Code) _____

Work Phone _____ Email Address _____

Place of Employment Position _____

Employer's Address _____

Name of someone who'll always know how to reach you _____

Address _____ Phone Number _____

The undersigned authorizes the financial institution to verify credit and employment history and/or have a credit reporting agency prepare a credit report on the undersigned, as individuals.

Signature _____ Date _____

Signature _____ Date _____

If this is a joint account, please provide the following information for the additional account holder.

Name Social Security Number _____

Date of Birth (mm/dd/yyyy) _____

Drivers License Number _____ State _____ Exp. Date _____

Street Address (required) _____ PO Box _____

City _____ State _____ Zip _____ Rent _____ Own _____

Years at Current Residence (*Note: If less than 1 year, please provide previous address.*) _____

Previous Address _____

Home Phone (A.C) _____ Cell Phone/Pager (A.C) _____

Work Phone _____ Email Address _____

Place of Employment Position _____

Employer's Address _____



The Bath State Bank

SWITCH YOUR DIRECT DEPOSIT

Date

Employer/Depositor's Name

Address

City

State

Zip

To Whom It May Concern:

You are currently depositing **MY ENTIRE CHECK / PART OF MY CHECK** (circle one) to the following account:

Previous Bank Name:

Previous Bank Routing Number:

Previous Account Number:

Please stop making deposits to that account and instead make them to:

Bath State Bank

Address: PO Box 10, Bath, Indiana 47010

Bath State Bank Routing Number: 074912302

Bath State Bank Account Number:

Account Type: (circle one) Checking Savings

If you have any questions in regards to this request, please contact at Bath State Bank at 765-732-3022.

Sincerely,

Signature

Name (please print)

Address

City

State

Zip

Other Information your employer may need (SSN, Employee ID#, etc.)

For Social Security Direct Deposit, please provide the following additional information:

Date of Birth (mm/dd/yyyy)

Social Security Number



The Bath State Bank

SWITCH YOUR WITHDRAWAL

Date

Name of Company that makes Automatic Withdrawal

Address

City

State

Zip

To Whom It May Concern:

You are currently withdrawing \$ (amount) for my (what payment is for),
(account or other identifying number), on (date) from the following account:

Previous Bank Name:

Previous Bank Routing Number:

Previous Account Number:

Please stop making withdrawals from that account and instead make them from:

Bath State Bank

Address: PO Box 10, Bath, Indiana 47010

Bath State Bank Routing Number: 074912302

Bath State Bank Account Number:

Account Type: (circle one) Checking Savings

If you have any questions in regards to this request, please contact at Bath State Bank at 765-732-3022.

Sincerely,

Signature

Name (please print)

Address

City

State

Zip



The Bath State Bank

CLOSE DOWN OLD ACCOUNT

Date _____

Bank Name _____

Address _____

Attention:

I wish to close and/or transfer money from my account to:

Bath State Bank

Please close my account and send the entire balance to:

Bath State Bank at PO Box 10, Bath, Indiana 47010.

Please close my account and send the entire balance to me at my home address.

Please keep the account open and send \$ to Bath State Bank at the address listed above.

If no penalty is assessed, please mail a check to my home address for any interest amount from my certificate of deposit at your institution.

(account number) _____

If you have any questions in regards to this request, please contact at:

Bath State Bank at 765-732-3022.

Thank you,

Customer's Signature _____

Joint Account Holder's Signature _____

Customer's Printed Name _____

Joint Account Holder's Printed Name _____

Address _____

City _____

State _____

Zip _____

Account Number _____