

5-STEP SWITCH KIT FOR BUSINESSES



This switch kit and the accompanying forms are designed to streamline the process of transferring your business accounts to Androscoggin Bank.

Please note that while we provide these forms to facilitate the transition, acceptance is not guaranteed by all institutions. Some organizations may require in-person or mailed requests, or additional documentation beyond what is provided here.

Important Reminder: Keep your sensitive account details secure. If you print this document, consider shredding it after use. If you choose to email any information, please be cautious, as email may not be a secure communication method.





THE 5-STEP PROCESS

1

OPEN YOUR ANDROSCOGGIN BANK BUSINESS ACCOUNTS

Visit any of our conveniently located branches or use our website to open your business accounts today. Whether it is personal or business, we have you covered.

2

START TO GET ORGANIZED

Use this 5-Step Switch Kit to organize the direct deposits and automatic payments that will be switched to your new Androscoggin Bank business accounts.

3

TRANSFER YOUR AUTOMATIC DEPOSITS

Send the Automatic Deposit Authorization Form to your vendors and merchant processors so they can automatically deposit funds into your new accounts. This form can also be used to transfer any other automatic deposits to your new accounts.

4

MOVE YOUR AUTOMATIC PAYMENTS

Send the Automatic Payment Authorization Form to each of your creditors to transfer any automatic payments to your new Androscoggin Bank accounts.

5

CLOSE YOUR OLD ACCOUNTS

Use the Account Closing Letter to instruct your previous financial institution to close your business accounts and detail how to disburse any remaining funds. Ensure all checks and debits have cleared before closing your old account.





STEP 2: GET ORGANIZED

Gather the most recent statements from your current financial institution. Be sure to include details for payroll, inventory, subscriptions, merchant processing, and any other accounts tied to your business

DIRECT DEPOSITS: List all direct deposits to your account(s).

Deposit Type	Company Name	Account Number	Amount	Date

AUTOMATIC PAYMENTS: List all withdrawals from your account(s).

Withdrawal	Company Name	Account Number	Amount	Date





STEP 2: GET ORGANIZED

For business accounts at Androscoggin Bank, the following documents are needed, dependent on what your business identifies as:

Sole Proprietorship with documentation

- Fictitious Name Statement (if applicable)
- Business License (if applicable)

Sole Proprietorship without documentation

- Information on the Owner
- Business in Owner Name Only

Corporation

- Articles of Incorporation
- Document of Resolution
- Beneficial Owner information for those owning 25% or more of the company AND one individual with managerial control over the legal entity

Partnership with documentation

- Certificate of Partnership/Articles of Partnership
- Partnership agreement
- Beneficial Owner information for those owning 25% or more of the company AND one individual with managerial control over the legal entity

Partnership without formal documentation

- Partnership agreement
- Beneficial Owner information for those owning 25% or more of the company AND one individual with managerial control over the legal entity

Limited Liability Company

- Articles of Organization/LLC
- Operating Agreement
- Beneficial Owner information for those owning 25% or more of the company AND one individual with managerial control over the legal entity

Associations

- Bylaws, Board Resolution
- Meeting Minutes
- If unincorporated, Beneficial Owner Information is not applicable

Non-Profits

- IRS Form 501C3
- Articles of Incorporation
- One individual with managerial control over the legal entity







STEP 3: Transferring direct deposits

Use Automatic Deposit Authorization Form to notify vendors, merchant processors and other sources to redirect deposits to your Androscoggin Bank account.

Tip: Attach a voided Androscoggin Bank check to this form. A starter check from when you opened your account will suffice. Feel free to make copies of the form as needed.





STEP 3: TRANSFERRING DIRECT DEPOSITS

DIRECT DEPOSIT AUTHORIZATION FORM

Attention: (E	Enter the company you war	nt depos	sits directed from here)		
NAME					
ADDRESS					
CITY	f		STATE		ZIP CODE
From: (Enter	your personal information	here)			
CUSTOMER NAME					
CUSTOMER ADDRE	ESS				
CITY		STATE			ZIP CODE
SOCIAL SECURITY NUMBER (IF REQUIRED)					PHONE NUMBER
and start dep	positing them into my				o depositing funds into my old account punt, as specified below.
	nt Information: BANK ROUTING NUMBER				
ACCOUNT NUMBER	R		☐ Checking		Savings
ACCOUNT NUMBER	R		☐ Checking		Savings
SIGNATURE				D	DATE
DEPOSIT:	☐ Total Amount☐ Total Amount	□ \$ □ \$			CKING account listed above NGS account listed above

*Note, be sure to include a voided Androscoggin Bank check with this form.







STEP 4: Transferring automatic payments

Complete Automatic Payment Authorization Form to transfer your automatic payments to Androscoggin Bank, or to set up new ones from your account. Allow sufficient time for the first payments to take effect.

Tip: Attach a voided Androscoggin Bank check to this form. A starter check from when you opened your account will suffice. Feel free to make copies of the form as needed.





STEP 4: TRANSFERRING AUTOMATIC PAYMENTS

AUTOMATIC PAYMENT AUTHORIZATION FORM

Attention: (Enter the con	npany you want paym	ents directed t	to here)			
NAME						
ADDRESS						
CITY				ZIP CODE		
From: (Enter your persona	al information here)					
CUSTOMER NAME				ACCOUNT NUMBER		
CUSTOMER ADDRESS						
CITY	STATE	STATE		ZIP CODE		
PHONE NUMBER						
T 14/1 1:14						
•	my accounts to A			ease redirect my automatic payments ount, as detailed below.		
EFFECTIVE: PAY:		mediately al Amount		Beginning/		
New Account Informa	tion:					
ANDROSCOGGIN BANK ROUTING NU	MBER					
ACCOUNT NUMBER		☐ Checking ☐ Savings				
SIGNATURE				DATE		

^{*}Note, be sure to include a voided Androscoggin Bank check with this form.







STEP 5: Closing your old accounts

Use the Account Closing Letter to instruct your previous bank to close your account(s) and transfer any remaining funds. Ensure all checks and debits have cleared before closing the account, and inquire about any potential closing fees.





STEP 5: CLOSING ACCOUNTS

ACCOUNT CLOSING LETTER

Attention: (Enter your old financial	l institution's	information he	ere)				
NAME							
ADDRESS							
CITY		STATE			ZIP CODE		
To Whom It May Concern, Please consider this letter as a Kindly issue a cashier's check applicable).							
Account Type		Account Number		er	Account Owner Names		
Please send all closing balan	ces to: (Ent	er your person	al informatio	n here)			
ADDRESS							
CITY	STATE	STATE		ZIP CODE			
PHONE NUMBER							
PRIMARY ACCOUNT OWNER SIGNATURE			DATE				
SECONDARY ACCOUNT OWNER SIGNATURE				DATE			



