



# Bank Iowa<sup>®</sup>

Your Success. Our Priority.

## AUTHORIZATION TO CHANGE MY DIRECT DEPOSIT

*Complete a separate form for each automatic deposit.*

Name of company initiating direct deposit:

---

Address of company:

---

My Name: \_\_\_\_\_

My Address: \_\_\_\_\_

My SSN: \_\_\_\_\_

I plan to close my checking account at:

---

Account # \_\_\_\_\_

Effective immediately, I authorize direct deposit to my new checking account at:

**Bank Iowa Humboldt**

506 Sumner Avenue

Humboldt, IA 50548

Phone: 515.332.1451 Fax: 515.332.3111

[www.bankiowabanks.com](http://www.bankiowabanks.com)

My new checking account # is: \_\_\_\_\_

The new routing/ABA # is \_\_\_\_\_

I have attached a voided check to verify the new account information. I understand it may take the company making the direct deposit up to 30 days to process this request.

Signature: \_\_\_\_\_

Phone number: \_\_\_\_\_

Date: \_\_\_\_\_



**Bank Iowa**<sup>®</sup>

Your Success. Our Priority.

**AUTHORIZATION TO CHANGE  
AUTOMATIC PAYMENT**

*Complete a separate form for each automatic payment.*

Name of payee:

\_\_\_\_\_

Payee address:

\_\_\_\_\_

My Name: \_\_\_\_\_

My Address: \_\_\_\_\_

My SSN: \_\_\_\_\_

I plan to close my checking account at:

\_\_\_\_\_

Account # \_\_\_\_\_

Effective immediately, I authorize payment from my new checking account at:

**Bank Iowa Humboldt**

506 Sumner Avenue

Humboldt, IA 50548

Phone: 515.332.1451 Fax: 515.332.3111

[www.bankiowabanks.com](http://www.bankiowabanks.com)

My new checking account # is: \_\_\_\_\_

The new routing/ABA # is \_\_\_\_\_

I have attached a voided check to verify the new account information. I understand it may take up to 30 days for the receiver to process this request.

Signature: \_\_\_\_\_

Phone number: \_\_\_\_\_

Date: \_\_\_\_\_



# Bank Iowa<sup>®</sup>

Your Success. Our Priority.

## AUTHORIZATION TO CLOSE ACCOUNT

Previous Financial Institution:

\_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

This form gives you the authorization to close my account number \_\_\_\_\_ and forward the balance to us at the address provided. Please make the check payable to BANK IOWA for benefit of (Name):

\_\_\_\_\_

Your prompt attention to this request is appreciated.

Thank you.

Signature:

\_\_\_\_\_ Date: \_\_\_\_\_

Joint signature:

\_\_\_\_\_ Date: \_\_\_\_\_

### **Bank Iowa Humboldt**

506 Sumner Avenue

Humboldt, IA 50548

Phone: 515.332.1451 Fax: 515.332.3111

[www.bankiowabanks.com](http://www.bankiowabanks.com)