

# Direct Deposit Change Request

## Instructions

### Direct Deposits

Use the **Direct Deposit Change Request Form** to notify your employer or source of income of your new bank information.

1. Check with your employer or source of income to make sure no other forms are required. For Social Security direct deposit, call the Social Security Administration at 1-800-772-1213 or go to [www.ssa.gov/deposit/howtosign.htm](http://www.ssa.gov/deposit/howtosign.htm)
2. Use the following form to establish your direct deposit at City Bank & Trust by providing it to your employer/source of income

## DIRECT DEPOSIT CHANGE REQUEST

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\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

Subject: Switch My Direct Deposit to a New Account

ATTN: \_\_\_\_\_

This form serves as notification that I wish to change instructions for my direct deposit to my new **City Bank** account. If you have any questions regarding this request, please contact me in writing or at the phone number listed below. Thank you for your prompt assistance in this matter.

Sincerely,

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

### DIRECT DEPOSIT INFORMATION

\_\_\_\_\_  
Name

\_\_\_\_\_  
Social Security Number or Employee Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone: Day Evening

\_\_\_\_\_  
Old Bank Name

\_\_\_\_\_  
Routing Number

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Amount Deposited (Enter Deposit Amount or "Total Deposit")

\_\_\_\_\_  
New Bank Name

\_\_\_\_\_  
Routing Number

\_\_\_\_\_  
Account Number



Member FDIC

