

SWITCH KIT

AUTHORIZATION TO CLOSE ACCOUNT

Complete this authorization to close accounts at other financial institutions and have funds transferred to The Tennessee Credit Union account. Print one authorization for each financial institution where you have accounts. Remember to destroy old checks, ATM cards, and debit cards.

Date

Bank/Other Financial Institution

Address

City/State/Zip



Routing Number

Account Number

Check

To Whom it May Concern:

Please close my account(s) with your financial institution:

Account Numbers: _____

Account Numbers: _____

Account Holder 1: _____

Account Holder 2: _____

And send a check for the remaining balance(s) to my new checking account at:

The Tennessee Credit Union

1400 8th Avenue South, Nashville, TN 37203

Routing Number: 264080853

Checking Account Number: _____

I have also made arrangements to discontinue direct deposit and automatic withdrawal from my accounts at your financial institution.

If you have any questions regarding this request, please contact me using the information below:

Please close my account(s) with your financial institution:

Account Holder 1 Signature: _____

Account Holder 2 Signature: _____

Phone Number: _____

Date: _____



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