

## SWITCH TIPS

### 1. Complete, sign and date this form to notify your current financial institution that you are closing your account.

If you are closing accounts from more than one financial institution, you must fill out a separate form for each institution.\*

\*Some institutions may require additional paperwork from you.

### 2. Choose a date to close the account.

You may close it immediately if you have no outstanding checks, automatic deposits (such as payroll, Social Security, alimony, dividend, or disability payments) and/or automatic withdrawals (such as mortgage payments, gym membership fees, monthly utility and household bills, credit card payments and insurance premiums). Otherwise, please allow at least two pay periods for processing and to allow all transactions to clear before switching over.



**SEFCU**

(518) 452-8183  
(800) 727-3328  
www.sefcu.com

# Request to Close Account

Current Financial Institution Name: \_\_\_\_\_

Current Financial Institution Address: \_\_\_\_\_  
\_\_\_\_\_

### Please close my account(s) as described below effective:

Immediately (*Do not choose this option if you have recurring automatic deposits such as payroll, Social Security, alimony, dividend, or disability payments OR automatic withdrawals such as mortgage payments, gym membership fees, monthly utility and household bills, credit card payments and insurance premiums.*)

— OR —

On \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (Please allow *at least two pay periods* for processing)

Account # \_\_\_\_\_  Checking  Savings  CD

Account # \_\_\_\_\_  Checking  Savings  CD

Account # \_\_\_\_\_  Checking  Savings  CD

### Please send funds to:

SEFCU Operations Support  
Patroon Creek Corporate Center  
700 Patroon Creek Blvd.  
Albany, NY 12206-1067

Please include my SEFCU account number on the check. Thank you.

Name (printed) \_\_\_\_\_

SEFCU account number \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
Accountholder signature