

## What To Do . . .

### Switching your account to South Shore Savings Bank is simple!

#### 1. Open a South Shore Savings Bank Account

Stop by any one of South Shore Savings Bank's convenient locations today and open an account with one of our friendly Customer Service Representatives! We offer a variety of checking and savings accounts to meet all of your needs.

When opening your account, you can add several other features to your account, such as our ATM or Debit MasterCard®, Overdraft Protection, Telephone Banking and Online Banking with FREE Bill Payment. We want to create an account that fits your lifestyle.

#### 2. Sign up for Direct Deposit

Simply have any of your regularly occurring payments (including Social Security benefits) deposited directly into your checking or savings account. You may want to consider our Direct Checking Account which includes, unlimited checking, no monthly service charge and no minimum balance requirements!

Fill out the Direct Deposit form that we've provided for you as authorization to your employer (or any other concerned party) to directly deposit a regularly scheduled payment into your account.

#### 3. Change Automatic Payment Deductions

Once your South Shore Savings Bank account has been opened and your direct deposit is being properly credited, you should change any automatic payment deductions that are currently taken out of your old account, by filling out the Automatic Payment Change Notice.

#### 4. Close Your Old Account

Once your South Shore Savings Bank account has been opened and your direct deposit is being properly credited, you should notify your previous institution to close your account, using the form provided.

It is typically a good idea to have your former account remain open until your statement arrives to verify that all of your checks have cleared before closing the account. You should immediately destroy any ATM/Debit cards as well as your remaining checks. Bring your checks to us and we'll be happy to shred them for you.

**ONCE COMPLETED, PLEASE BRING THE FORM(S) BACK TO ANY SOUTH SHORE SAVINGS BANK AND WE'LL TAKE CARE OF THE CHANGEOVER.**



**South Shore**  
SAVINGS BANK

*Live life for all it's worth!*

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#857 9/06

# Account Transfer Kit



**South Shore**  
SAVINGS BANK

*Live life for all it's worth!*

## Direct Deposit Change Notice

Thereby authorize my employer (or other concerned party) to deposit my payroll (or other regularly scheduled payment) into my South Shore Savings Bank Account as listed below:

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Home Telephone \_\_\_\_\_

Work Telephone \_\_\_\_\_

Other Telephone \_\_\_\_\_

Checking/Savings Account Number(s)	Amount(s)
#1: _____	\$ _____
#2: _____	\$ _____
#3: _____	\$ _____

**Routing #: 211371447**

**South Shore Savings Bank  
1530 Main Street  
South Weymouth, MA 02190**

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

Employee #: \_\_\_\_\_

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

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

## Automatic Payment Change Notice

Complete this form for each company or organization with whom you have arranged for an automatic payment from your account. Please feel free to photo copy this form if necessary or visit your local South Shore Savings Bank for additional forms.

**I am closing my account with:**

Name of financial institution: \_\_\_\_\_

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

Date Account Will be Closed: \_\_\_\_\_

Name(s) on account: \_\_\_\_\_

**I hereby authorize automatic deduction from my new account with:**

**South Shore Savings Bank  
1530 Main Street  
South Weymouth, MA 02190  
ABA Routing Number: 211371447**

**My new South Shore Savings Bank Account number is:**

Company to receive this form: \_\_\_\_\_

Address where payment will be sent: \_\_\_\_\_

Phone number of company: \_\_\_\_\_

Account number with this company: \_\_\_\_\_

Your Name(s): \_\_\_\_\_

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

Signature(s): \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

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

## Authorization to Close Account

In order to close out your account(s) at your current financial institution(s), please complete this Authorization to Close Account Form. Please feel free to photo copy this form if necessary or visit your local South Shore Savings Bank for additional forms.

**Please close the following account:**

Name of financial institution: \_\_\_\_\_

Date of Account Closing: \_\_\_\_\_

Name (Signer 1): \_\_\_\_\_

Name (Signer 2): \_\_\_\_\_

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

Social Security Number (Signer 1): \_\_\_\_\_

Social Security Number (Signer 2): \_\_\_\_\_

**Please send a check payable to me/us for the balance in the account listed above to the address that is on file.**

Signature (Signer 1): \_\_\_\_\_

Signature (Signer 2): \_\_\_\_\_

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