

ROANOKE RAPIDS SAVINGS BANK

325 Becker Drive • Roanoke Rapids, NC 27870
828 Roanoke Avenue • Roanoke Rapids, NC 27870
(252) 537-8061
www.rrsb.com

RapidSwitch Checklist

1. Have your new Roanoke Rapids Savings Bank account number ready when completing authorization forms in switch kit. Ask your RRSB Customer Service Representative for the correct format of your account number for automatic deposits and withdrawals from your account:

Account number _____ checking / savings

Account number _____ checking / savings

Account number _____ checking / savings

2. Switch direct deposits and automatic deposits using our Direct Deposit Change Authorization Form

- Employer deposit
- Government deposit
- Social Security deposit

- Brokerage deposit
- Child Support or court-ordered deposits
- Other

3. Switch automatic payments/withdrawals using our Automatic Withdrawal Change Authorization Form

- Mortgage/Rent
- Association Fees
- Internet Service
- Investments
- Utilities: Electric, Water, Gas
- Online Billing

- Auto
- Club/Membership Dues
- Cable TV/Satellite
- Credit Cards
- Phone/Cell Phone
- Other

4. Close all other savings, checking, and bill payment accounts using our Account Closing Authorization Form

Financial Institution(s) _____

5. Refinance loans held at previous financial institution(s)
6. Set up additional services with Roanoke Rapids Savings Bank

- Free RRSB RapidNet Online Internet Banking (visit www.rrsb.com)
- Free RRSB Rapid BillPay Online Bill Payment (visit www.rrsb.com)
- Free RRSB Mobile App (Available in Google Play and Apple Store)

ROANOKE RAPIDS SAVINGS BANK SSB



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 2451 Bolling Road • Roanoke Rapids, NC 27870
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Authorization to Close Account

Date: _____

To: _____
Name of Financial Institution

RE: **Account Closeout**

Address

City/State/Zip

To Whom It May Concern:

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

- | | | | | |
|-----------------|-----------------------------------|----------------------------------|---------------------------------------|--------------------------------|
| Account # _____ | <input type="checkbox"/> Checking | <input type="checkbox"/> Savings | <input type="checkbox"/> Money Market | <input type="checkbox"/> Other |
| Account # _____ | <input type="checkbox"/> Checking | <input type="checkbox"/> Savings | <input type="checkbox"/> Money Market | <input type="checkbox"/> Other |
| Account # _____ | <input type="checkbox"/> Checking | <input type="checkbox"/> Savings | <input type="checkbox"/> Money Market | <input type="checkbox"/> Other |
| Account # _____ | <input type="checkbox"/> Checking | <input type="checkbox"/> Savings | <input type="checkbox"/> Money Market | <input type="checkbox"/> Other |

ID Verification: _____ (Social Security Number or Account Password)

Please send a check for the remaining balance(s) to: (check remittance option below)

My new account at: Roanoke Rapids Savings Bank • PO Box 130 • Roanoke Rapids, NC 27870

Roanoke Rapids Savings Bank **Routing Number: 253171197**

Roanoke Rapids Savings Bank Account Number: _____ Savings / Checking
(circle one)

Myself at this address: _____
Name

Address

City State Zip

I have also made arrangements to discontinue all direct deposits and automatic withdrawals from my account(s) with your financial institution.

If you have any questions about this request, please call me during the day / evening at (____) _____ - _____
(circle one) (phone number)

Thank you,

Account Holder 1 Signature _____ Date _____ Social Security Number

Account Holder 2 Signature _____ Date _____ Social Security Number

Name

Address

City State Zip

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Automatic Withdrawal Change Request Form

Date: _____

To: _____

Name of company that makes automatic withdrawal

Address

City/State/Zip

RE: Change In Automatic Withdrawal

To Whom It May Concern:

You are currently withdrawing \$ _____ on a _____ basis for my _____ payment
(amount) (weekly, bi-weekly, monthly) (what payment is for)
from: _____ account or card number: _____
(Former Financial Institution)

Please discontinue withdrawals from the account listed above and: (check one of the following options)

Begin withdrawals from my account at:

Roanoke Rapids Savings Bank
PO Box 130
325 Becker Drive
Roanoke Rapids, NC 27870
Routing Number: 253171197
Account Number: _____

Savings/Checking
(circle one)

Begin withdrawals from my Roanoke Rapids Savings Bank Visa Debit Card:

Card Number: _____ Expiration date: _____ CVV: _____

If you have any questions, please call me during the day / evening at (_____) _____ - _____
(circle one) (phone number)

Thank you,

Signature _____ Date _____

Name

Social Security Number

Address

City

State

Zip

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Direct Deposit Change Request Form

Date: _____

To: _____
Employer/Depositor's Name

RE: **Change of direct deposit routing**

Address

City/State/Zip

To Whom It May Concern

You are currently making direct deposits on my behalf to _____
Former Financial Institution

Checking Account # _____

Savings Account # _____

Please discontinue direct deposits to the account listed above and immediately begin sending my direct deposit to my account at:

Roanoke Rapids Savings Bank
PO Box 130
325 Becker Drive
Roanoke Rapids, NC 27870
Routing Number: 253171197

Deposit Instructions: (check one of the following deposit options)

Deposit entire amount to account number _____ circle account type Checking Savings

Deposit \$ _____ to account number _____ circle account type Checking Savings

AND deposit the remainder to account number _____ circle account type Checking Savings

If you have any questions, please call me during the day / evening at (_____) _____ - _____
(circle one) (phone number)

Thank you,

Signature _____ Date _____

Name

Social Security Number

Address

City State Zip