

Stevenson Office
256.437.2171

Higdon Office
256.597.2446

Scottsboro Office
256.259.9005

Rainsville Office
256.638.2260

Fort Payne South
256.997.9900

Fort Payne North
256.845.6550

Centre Office
256.927.3691

Leesburg Office
256.526.8535



Account Switch Kit

We know how busy you are, so we have made it very convenient for you to switch your accounts to First Southern State Bank. Follow the three easy steps in this switch kit and allow us to become “your” bank.

Changing banks can be as easy as 1,2,3!

1

OPEN A BANK ACCOUNT

- Open your account at any branch location.
- Stop using your old account and let checks and debit card transactions that you have made to clear. (Approximately 2-3 weeks).

2

TRANSFER YOUR DIRECT DEPOSITS AND AUTOMATIC PAYMENTS

Use our [Account Inventory Checklist](#), and [Direct Deposit Change Form](#) to redirect your direct deposits and automatic payments.

3

CLOSE YOUR OLD ACCOUNT

- Fill out the [Account Closure Request Form](#) to instruct your old bank to close your account or visit the bank in person. The bank will send a check for any remaining balance per your provided instruction.
- Keep all closing statements for your records.

Stevenson Office
256.437.2171

Higdon Office
256.597.2446

Scottsboro Office
256.259.9005

Rainsville Office
256.638.2260

Fort Payne South
256.997.9900

Fort Payne North
256.845.6550

Centre Office
256.927.3691

Leesburg Office
256.526.8535



Direct Deposit Change Form

Complete this form and submit to your employer's Human Resources or Payroll department.

I (Name) _____

hereby authorize and instruct _____
(Company)

to deposit the amount of each of my payroll deposits directly into my bank account at First Southern State Bank as listed below:

Account # _____

ABA Routing #062202477

Effective Date: _____

I acknowledge that the origination of these transactions must comply with the provisions of U.S. law. If you have any questions or if there is a penalty or fee please contact me at:

(Phone)

Thank you for your attention in this matter.

Customer Signature

Date

ATTACH FSSB VOIDED CHECK HERE

Stevenson Office
256.437.2171

Higdon Office
256.597.2446

Scottsboro Office
256.259.9005

Rainsville Office
256.638.2260

Fort Payne South
256.997.9900

Fort Payne North
256.845.6550

Centre Office
256.927.3691

Leesburg Office
256.526.8535



Account Inventory Checklist

Use this page to help identify important information to make switching your account to First Southern State Bank stress-free.

First Southern State Bank

Name and Address: 80 Bank Street, PO Box 548, Stevenson, AL 35772

Routing Number: 062202477

Checking Account Number _____

Savings Account Number _____



Direct Deposit Information

CHECK IF APPLIES	AUTOMATIC DEPOSITS	ACCOUNT #	AMOUNT	DATE CONTACTED	DATE COMPLETE
	Employer (s) Payroll				
	Government Deposit (Social Security)				
	Pension(s)/Retirement Plans				
	Investments/Brokerage Deposits				
	Transfers From Other Bank Accts (Savings to Checking, etc.)				
	Other				

Automatic Payments/Transfers

CHECK IF APPLIES	TYPE OF AUTOMATIC PAYMENT OR TRANSFER	ACCOUNT #	AMOUNT	DATE CONTACTED	DATE COMPLETE
	Mortgage/Rent				
	Car Payment				
	Insurance				
	Gas				
	Electric				
	Water				
	Phone				
	Cell Phone				
	Cable/Satellite TV				
	Garbage				
	Internet Provider				
	Health Club Membership				
	Credit Cards				
	Department Store/Retail Cards				
	Daycare				
	Investments				
	IRA/Retirement				
	Church or Non-Profit Contributions				
	Other				
	Other				

Stevenson Office
256.437.2171

Higdon Office
256.597.2446

Scottsboro Office
256.259.9005

Rainsville Office
256.638.2260

Fort Payne South
256.997.9900

Fort Payne North
256.845.6550

Centre Office
256.927.3691

Leesburg Office
256.526.8535



Account Closure Request

Complete this form to request that your current bank account be closed. Once completed, mail the form(s) directly to your current bank, or visit the bank in person.

Dear Sir or Madam,

I hereby request that the following account(s) with you be closed:

Account Number _____
Checking _____ Savings _____ Other _____

Account Number _____
Checking _____ Savings _____ Other _____

Account Number _____
Checking _____ Savings _____ Other _____

Account Number _____
Checking _____ Savings _____ Other _____

Please prepare a cashier's check for the balance of my account payable to:

Name _____

Address _____

City _____ State _____ Zip _____

If you have any questions or if there is a penalty or fee please contact me at;

(Phone)

Thank you for your attention to this matter.

Customer Signature

Joint Account Holder Signature

Date

Date