

## Make the switch to New Dimensions Federal Credit Union

Don't wait any longer! If the only reason you haven't opened a New Dimensions Federal Credit Union checking account is because it's a hassle to close your old one, our hassle-free Switch Kit has been designed to make the switch simple and convenient. You may apply for a CU24<sup>sm</sup> Visa Check Card, transfer your direct deposit, automatic payments like health club memberships, and close your checking account... all with this kit. Just complete the short forms on the inside, send them to us and we'll do the rest.



### Low fees.

### Convenience with CU24<sup>sm</sup> Visa Check Card.

### Online and phone access to your accounts!

### Service you can rely on and trust.

### Simplify your life when you make the switch.

## Make the simple switch to New Dimensions Federal Credit Union with this kit

### Here's how you do it ...

#### 1. New Application for a Credit Union Checking Account

Apply for your New Dimensions Federal Credit Union checking account. Once we receive the completed New Account Application, we'll process it and if accepted, send you a welcome letter with your account information and applicable disclosures. (You will need to open a savings account with us first if you don't already have one.)

#### 2. New Application For A CU24<sup>sm</sup> Visa Check Card

Complete the application for your CU24 Visa Check Card. Once we receive the application, we will process it, and if accepted, send you a card and the Electronic Funds Transfer and Cardholder Agreement and Disclosures.

#### 3. & 4. Change Notices

Complete the Direct Deposit and Automatic Withdrawal Change Notices. We will mail the Direct Deposit form to the company or organization that is automatically depositing funds into your existing checking account. We'll also mail the Automatic Withdrawal form to all companies or organizations like health clubs that are taking withdrawals from your existing account. Write your new account number on the forms. You may make additional copies of these forms if necessary.

#### 5. Closure Request

Once your direct deposit and/or automatic withdrawals start coming to your new New Dimensions Federal Credit Union checking account, and you know all your checks have cleared your old checking account, mail the Closure Request to your previous institution and any remaining balance will be sent to your new checking account.

#### Questions:

If you have any questions about moving your account to New Dimensions Federal Credit Union, please call us at (207) 872-2771.

## Services Offered

- Share Deposit Accounts
- Share Draft (Checking) Accounts
- Monty Moose Youth Savings Program
- Take Charge Young Adult Savings
- Sixty Plus Senior Program
- HSAs Health Savings Accounts
- Share Certificates
- IRA Certificates
- Certificate Savings (Tiered) Accounts
- Club Accounts
- Small Business Services
- Traditional and Roth IRAs
- Coverdell Education Savings Accounts
- ATM
- Night Deposit Box
- Teller-Phone<sup>SM</sup>
- Online Anytime Home Banking
- Click-n-Pay Bill Pay Service
- CUe-Statements via the Internet
- Mobile Services
- Visa<sup>®</sup> Check and Credit Cards
- Visa Gift Cards & Reloadable Cards
- Payroll Deduction
- Auto Loans
- Personal Loans
- Recreational Vehicle Loans
- Real Estate Loans
- Home Equity Line of Credit
- Construction Loans
- Commercial Loans
- Life and Disability Insurance Programs (available to qualified borrowers)
- Guaranteed Auto Protection Program (GAP Plus)
- Route 66 Extended Warranty
- Pets Best Insurance
- Identity Theft 911
- Indirect Lending Program
- Internet Lending Program
- Safe Deposit Boxes
- Coin Stream<sup>®</sup> (coin machine)
- Financial Planning
- ACH/Wire Transfers
- Money Orders
- U.S. Savings Bonds Redeemed
- Federal Tax Payments Accepted
- Free Notary Service
- Signature Guarantee Service



## Hassle-Free SWITCHKIT

Place in an envelope and mail to:

**New Dimensions  
Federal Credit Union**  
61 Grove Street  
Waterville, Maine 04901



## Make the switch

to New Dimensions Federal Credit Union. Apply for our Share Draft/Checking Account and CU24<sup>sm</sup> Visa Check Card

## Hassle-Free SWITCHKIT

with checking account and debit card applications.



### Lower fees



### More convenience with remote access options



### Service you can count on

 **New Dimensions**  
Federal Credit Union

*There is a difference!*



## 1. For A New Dimensions Federal Credit Union Checking Account

Are you a:  New Member  
 Existing Member

Account Holder Name

Social Security #      Date of Birth

Address

City, State, Zip

Telephone Number      Email Address

Joint Owner Name

Social Security #      Date of Birth

Address

City, State, Zip

Telephone Number      Email Address

Please open a checking account for me at New Dimensions Federal Credit Union.

Please send the following information to me (check if desired):

- Overdraft protection (for checking)
- Home Banking (Internet banking)
- CUe-Statement<sup>sm</sup> (statements via the Internet)

X \_\_\_\_\_  
Account Holder Signature      Date

X \_\_\_\_\_  
Joint Owner Signature      Date

I/We hereby consent to the necessary credit investigation in connection with the application and grant permission for its reproduction. I/We warrant that all information is true and complete.

## 2. For A CU24<sup>sm</sup> Visa Check Card (Debit Card)

Account Holder Name

Social Security #

Mother's Maiden Name

Joint Owner Name

Social Security Number

Mother's Maiden Name

Address

City, State, Zip

Home Phone      Date of Birth

### Business Information

Employed By

Position      Business Number

Address

City, State, Zip

(For Internal Use Only)

Credit Union Checking Account #

I/We hereby apply for a CU24 Visa Check Card. I/We understand that if this application is approved, the Credit Union will send me/us the Electronic Funds Transfer and Cardholder Agreement and Disclosures which govern the use of the CU24 Visa Check Card. By using the CU24 Visa Check Card issued by the Credit Union upon approval of this application, I/We signify our Agreement to be bound by the terms of the Electronic Funds Transfer and Cardholder Agreement and Disclosures.

X \_\_\_\_\_  
Account Holder Signature      Date

X \_\_\_\_\_  
Joint Owner Signature      Date

***In order to issue a card to either signer of a joint account, both owners must sign.***

## 3. To Change Your Direct Deposit

Name

Daytime Phone #

Name of Payer (employer, investment company, etc.)

Address

City, State, Zip

### Previous financial institution direct deposit was sent to:

Name of Institution      Type of Account

Address

City, State, Zip

### New Financial Institution Information:

New Dimensions Federal Credit Union  
61 Grove Street  
Waterville, Maine 04901  
ROUTING #211288860

Credit Union Checking Account #

### Direct Deposit Change ONLY

I hereby authorize my direct deposit to be sent to my New Dimensions Federal Credit Union checking account and my previous institution notified. I have attached a copy of a voided check for your reference.

Please make this effective \_\_\_\_\_ (date).

X \_\_\_\_\_  
Signature      Date

(make additional copies if necessary)

## 4. To Change Your Automatic Withdrawals

(preauthorized withdrawals, like health club memberships)

Name

Daytime Phone #

Company to Receive Withdrawal

Address

City, State, Zip

### Previous financial institution with automatic withdrawals:

Name of Institution      Type of Account

Address

City, State, Zip

Amount of Withdrawal

### New Financial Institution Information:

New Dimensions Federal Credit Union  
61 Grove Street  
Waterville, Maine 04901  
ROUTING #211288860

Credit Union Checking Account #

### Automatic Withdrawal Change ONLY

I hereby authorize you to redirect future preauthorized automatic withdrawals from my New Dimensions Federal Credit Union checking account. Please make this effective \_\_\_\_\_ (date). I will review all transfers when completed.

X \_\_\_\_\_  
Signature      Date

(make additional copies if necessary)

## 5. To Close Your Current Checking Account

### (Forward to previous financial institution)

Account Holder Name

Social Security #      Daytime Phone #

Joint Owner Name

### Previous financial institution with checking account

Name of Institution      Account

Address

City, State, ZIP

Checking Account #

Please Make Checks Payable to

Account Holder's Name

### For Deposit Only to:

New Dimensions Federal Credit Union Checking Account Number

### Mail to:

New Dimensions Federal Credit Union  
61 Grove Street  
Waterville, Maine 04901  
ROUTING #211288860

### IMPORTANT: Please read.

I hereby authorize the closure of my checking account and the forwarding of funds to New Dimensions Federal Credit Union. I certify that all my checks have cleared the account to be closed and all direct deposits and automatic withdrawals have been stopped.

X \_\_\_\_\_  
Account Holder Signature      Date

X \_\_\_\_\_  
Joint Owner Signature      Date

detach and forward to previous financial institution