



Spending Account Switch Kit

Changing bank accounts can be stressful. Whatever your reason for switching, Heartland Credit Union is here to make it as easy as it can be. Our self-help kit makes it stress-free to prepare for the switch to any of our great accounts.

WELCOME TO HCU! LET'S GET STARTED

- First, complete the New Membership Application to open an account with HCU.
- Next, fill out the Direct Deposit Transfer form and Automatic Withdraw/Payment Change form to switch your automatic deposits and payments.
- Finally, deliver the completed Close Old Account form to your previous financial institution.
- We don't want you to miss a beat! To ensure a seamless switch, review the Switch Kit Worksheet to make sure you have updated all automatic payments and deposits.
- If you need help completing the Switch Kit, just stop by one of our branches in Hutchinson, Haven, Newton, or Wichita. You can also reach us by visiting www.hcu.coop and clicking on the "live chat" button in the lower right-hand corner of the page. We're be happy to assist you!





New Membership Application

To help us determine basic membership qualifications, please provide the following information. A savings account with a minimum of \$25 balance is required to become a member of HCU. A credit report will be obtained.

How did you hear abo	ut us?			
I'm interested in (chec	ck all that apply):			
	☐ HCU Online Banking	☐ HCU Visa Debit	Card	
☐ Overdraft protection	☐ HCU Mobile Banking	☐ Money Market/In	ıv. Shares 🔲 IRA	
☐ Starter checks	☐ HCU eBranch	☐ Trust Account ☐ HSA		
☐ eStatements/eAlerts				
_			_	
Applicant			Authorized Signer or P.O. A.	
Name (first, middle, last)		Name (first, middle, last)		
Current address, city state, zip	Years at this address	Current address, city state, zip Years at this ad		
Social Security Number	Mother's maiden name	Social Security Number	Mother's maiden name	
Date of birth (mm/dd/yyyy)	Home phone	Date of birth (mm/dd/yyyy)	Home phone	
Employer and Occupation		Employer and Occupation	Employer and Occupation	
Driver's license: State	Driver's license: Number	Driver's license: State	Driver's license: Number	
Driver's license: Issue date	Driver's license: Expiration date	Driver's license: Issue date	Driver's license: Expiration date	
Work phone	Mobile phone	Work phone	Mobile phone	
Email address		Email address		
Are you a U.S. citizen or permanent resident alien? □Yes □No		Are you a U.S. citizen or permanent resident alien? □Yes □No		
Have you ever filed for bankruptcy or had a debt adjustment plan confirmed under Chapter 13?		Have you ever filed for bankruptcy or had a debt adjustment plan confirmed under Chapter 13? ☐ Yes ☐ No		
	Time on job	Own or rent?	Time on job	
Own or rent? Gross monthly income	Weekly hours worked	Gross monthly income	Weekly hours worked	
I authorize Heartland Cree everything I have stated in	dit Union to obtain credit report n this application is correct to t	ts in connection with this a he best of my knowledge.		
Applicant signature		Co-Applicant/Authorized Signer/P.O.A. sign	nature	
Heartl	and		Your savings federally insured to at least \$250,000 and backed by the full faith and credit of the United States Government RCUA National Credit Union Administration, a U.S. Government Agency	
For Heartland Credit Union use:				
ODP Line of Credit \$	Share Transfer Acct:	Courtesy Pay \$	For Debit Card Trans	

Direct Deposit Transfer Form

Complete this form and submit it to your employer or Social Security/Retirement Office to re-direct your electronic deposit into your new HCU Spending account.

Date		-	
Employer/Organization			
Address	City	State	Zip
		Social Security Number	•
Please discontinue m	y direct deposit to:		
Financial institution			
Account number		_ Amount \$	
Please initiate my dire	ect deposit to:		
Heartland Credit Ur 900 E 23rd St Hutchinson, KS 675			
Member name			
Routing number	301178372	HCU member number	
Deposit amount \$	□ Spending \$ _	□ Savings \$	
If you have any questions	, please don't hesitate to call 6	620.669.0177 or 800.428.8472.	
Employee phone			
Member's signature		Date	



Automatic Withdrawal/Payment Change Form

Please give this form to each company that you have scheduled recurring automatic withdrawal(s) or payment(s). To whom it may concern at: Company name _____ Address _____ Phone _____, and I currently have an automatic My account number with you is withdrawal/payment set up with your company and I wish to change my payment instructions. Please stop all debits from my account at my old financial institution at: Routing number Account number As of _____, please stop debiting my □ Checking and/or □ Savings account. Please start all debits from my new account at: Heartland Credit Union 900 E 23rd St Hutchinson, KS 67502 Routing number _____ 301178372 Account Number _____ As of _____, please start debiting my □ Spending and/or □ Savings account.

Member's signature _____ Date ____



Please Close Old Account

Please give this form to your former financial institution, once all your checks, debit card transactions, automatic payments, bill payments, and/or direct deposits have cleared from your previous checking account.

To whom it may concern:			
Please consider this official notice to	o close my account(s) with your	institution.	
Financial institution			
Address		Zip	
Please close account(s)	State	ΖIÞ	
Effective date			
Please send the remaining balance	to mv new Heartland Credit Unio	n account:	
Heartland Credit Union 900 E 23rd St Hutchinson, KS 67502	•		
HCU member number	Routing number	301178372	
Name (Please print)			
Member's signature	Date	Date	
Address	State	Zip	
Phone			



Switch Kit Worksheet

AUTOMATIC PAYMENTS

Payment	Company	Payment Method	Account #	Payment Date
Mortgage				
Loan payment				
Loan payment				
Loan payment				
Insurance				
Insurance				
Insurance				
Credit Card				
Electric bill				
Water/Sewer				
Trash services				
Cable				
Internet				
Cell phone				
Phone				
Health club				
Investments				
Investments				
IRA/retirement				
Charity				
Charity				
Charity				
Day care				
Other				

AUTOMATIC DEPOSITS

Deposits	Company	Deposit Method	Account #	Deposit Date
Payroll				
Payroll				
Retirement				
Social Security				
Investment				
Investment				
Other				

