



SWITCH KIT

MAKE THE SWITCH TO TOWER BANK: SWITCHING BANKS HAS NEVER BEEN EASIER!

Switch today and receive the uncompromising commitment to exceptional customer service that you deserve, along with individualized products and services to help you achieve your financial goals. And remember, at Tower Bank we believe in giving you free access to your money - anytime, anywhere. Enjoy free unlimited ATM transactions – anywhere in the world, with no strings attached!

Follow the step by step guide below to make the switch to Tower Bank! Please call us at 1 866 597 2137 or visit your local Tower Bank branch and we will be glad to help you every step of the way! Thank you for choosing Tower Bank – we look forward to serving you! **Let's get started...**

[1] Open your Tower Bank account at a branch or online.

Locate the closest Tower Bank branch by clicking on the “Locations” tab on our website. Apply online by visiting www.yourtowerbank.com. Click on “Open an Account Online!” and then choose the type of account you would like to open.

[2] Enroll in Online Banking.

Sign up for online banking by visiting a branch or www.yourtowerbank.com and click “First Time Log In” under Internet Banking. Manage your finances 24 hours a day with online banking from Tower Bank.

[3] Set up Your Automatic Direct Deposits and Automatic Withdrawals from Tower Bank.

- Fill out the attached Automatic Withdrawals and Direct Deposits chart to track any automatic payments and deposits that will be switched to Tower Bank.
- Fill out the attached Automatic Deposit Authorization Form and let us help you switch your direct deposits into your new Tower Bank account. Attach a voided Tower Bank check to this form.
- Fill out the attached Automatic Withdrawal Authorization Form and let us help you switch your automatic withdrawals into your new Tower Bank account.

[4] Transfer your funds to Tower Bank.

Complete the attached Transfer Letter to authorize the closing of your account(s) at your current bank and transfer of funds to your Tower Bank account. Remember to securely dispose of any old checks.

MISSION STATEMENT

Tower Bank will positively impact lives by helping people achieve their dreams.

VISION STATEMENT

Tower Bank will be a high performing regional financial services company that creates financial success for consumer, business, and not for profit customers in the markets we choose to serve.

VALUE STATEMENT

Tower Bank is committed to attracting and retaining employees who are passionate about providing uncompromising service to our customers with a sense of warmth, integrity, friendliness, and company spirit. We value and respect each other because we truly believe that our success only comes from working together for our team's success.



SWITCH KIT

Checking Savings Money Market Other _____

APPLICANT

Last Name _____

First Name _____ Middle Name _____

Birthdate _____ Social Security _____

Current Physical Address _____

City / State / Zip Code _____

Current Mailing Address _____

City / State / Zip Code _____

Driver's License Number and State _____

Home Phone _____ Cell Phone _____

Work Phone _____ Email _____

Employer _____

Please choose three security questions and answers to verify your identity if you misplace your account information:

Security Question 1 _____ Answer _____

Security Question 2 _____ Answer _____

Security Question 3 _____ Answer _____

JOINT APPLICANT

Last Name _____

First Name _____ Middle Name _____

Birthdate _____ Social Security _____

Current Physical Address _____

City / State / Zip Code _____

Current Mailing Address _____

City / State / Zip Code _____

Driver's License Number and State _____

Home Phone _____ Cell Phone _____

Work Phone _____ Email _____

Employer _____

Please choose three security questions and answers to verify your identity if you misplace your account information:

Security Question 1 _____ Answer _____

Security Question 2 _____ Answer _____

Security Question 3 _____ Answer _____

I certify that the information I have stated in the application and on any attachment is true and correct. By signing below, I understand that my signature(s) and opening deposit(s) will be required at a future date. I understand that bank approval standards apply. I agree to provide one or more forms of identification. I understand that this statement applies to all person who sign below.

Signature of Applicant _____ Date _____

Signature of Co-Applicant _____ Date _____



SWITCH KIT

AUTOMATIC DEPOSIT AUTHORIZATION CHANGE

This form serves as notification that I wish to change instructions for the automatic deposit to my new Tower Bank account.

CUSTOMER INFORMATION

Name _____
Address _____
City / State / Zip Code _____
Daytime Phone _____
Social Security _____

ORIGINATOR INFORMATION

Name _____
Address _____
City / State / Zip Code _____
Type (i.e., payroll, pension, etc.) _____

BANK ACCOUNT INFORMATION

Begin automatic deposit to the following account, effective: _____ / _____ / _____ *

Financial Institution: **Tower Bank** Routing Number: **031318907**

Checking _____
 Savings _____
 Money Market _____
 Other _____

Discontinue automatic deposit to the following accounts:

Current Financial Institution: _____

Checking _____
 Savings _____
 Money Market _____
 Other _____

Signature _____ Date _____

* Some automatic payments or debits require advance notice of changes. Please include these notice periods when determining the new effective dates.



SWITCH KIT

AUTOMATIC WITHDRAWAL AUTHORIZATION CHANGE

This form serves as notification that I wish to change instructions for the automatic withdrawal to my new Tower Bank account.

CUSTOMER INFORMATION

Name _____
Address _____
City / State / Zip Code _____
Daytime Phone _____
Social Security _____

PAYEE INFORMATION *(company receiving funds)*

Name _____
Address _____
City / State / Zip Code _____
Payment Type (i.e., mortgage, utilities, etc.) _____

BANK ACCOUNT INFORMATION

Begin automatic withdrawal from the following account, effective: _____ / _____ / _____ *

Financial Institution: **Tower Bank** Routing Number: **031318907**

Checking _____
 Savings _____
 Money Market _____
 Other _____

Discontinue automatic withdrawal from the following account:

Current Financial Institution: _____

Checking _____
 Savings _____
 Money Market _____
 Other _____

Signature _____ Date _____

* Some automatic payments or debits require advance notice of changes. Please include these notice periods when determining the new effective dates.



Make the Switch to Tower Bank!
www.yourtowerbank.com · 1 866 597 2137

Member FDIC · Equal Housing Lender

SWITCH KIT

TRANSFER LETTER

*Please complete this form only if you request that Tower Bank close
your other financial institution's account(s) on your behalf.*

CUSTOMER INFORMATION

Name _____
Address _____
City / State / Zip Code _____

FINANCIAL INSTITUTION INFORMATION

Former Financial Institution's Name _____
Former Financial Institution's Address _____
City / State / Zip Code _____

Date _____

ACCOUNT SERVICES

Please accept this as my authorization to close the following accounts:

Checking _____
 Savings _____
 Money Market _____
 Other _____

Please make check payable to Customer's Name, reference the account number listed below, and send the check to:

Tower Bank
Attn: _____
P.O. Box 8
Greencastle, PA 17225

Account Number: _____

ACCOUNT OWNER

Signature _____ Printed Name _____

ACCOUNT CO-OWNER

Signature _____ Printed Name _____



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AUTOMATIC WITHDRAWALS

Payment	Company	Phone Number	Account Number	Amount	Date of Payment
Mortgage / Rent					
Auto Loans					
Insurance					
Credit Cards					
Gas / Oil					
Electric					
Cable / TV					
Telephone					
Cell Phone					
Water					
Trash Removal					
Internet					
Health Club					
Investments					
IRA / Retirement					
Charities					
Daycare					
School Expense					
Other					
Other					

DIRECT DEPOSITS

Payment	Company	Phone Number	Account Number	Amount	Date of Payment
Employee Payroll					
Retirement					
Social Security					
Investments					
Other					
Other					