Worcester Police Department Credit Union Switch Kit

"Ditch the banks, for YOUR Credit Union"



The Credit Union recognizes that changing financial institutions can be a frustrating challenge. Setting up direct deposit, setting up your payees in Bill Pay and closing you old accounts can sometimes seem tedious. We can help make the transition as smooth as possible with our easy to use Switch Kit.



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Worcester Police Department Credit Union Switch Kit

We are committed to making your switch to the Worcester Police Department Credit Union quick and simple. Just follow the steps below, fill out the forms you need, and you're ready to realize all the benefits of banking with the Credit Union. If you haven't opened your account yet, stop by the Credit Union or give us a call at 508-799-7677.

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Getting Started

To get started, complete the <u>Organizer Worksheet</u> to help gather the information about your new and former checking account, your direct deposits, and your Bill Pay payees.

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Direct Deposits (Transfer or Establish)

With today's busy lifestyles, direct deposit can save you time and allow easy access to your money. Whether it is your paycheck or other income source, knowing that your funds have arrived safely and on time gives you peace of mind. To transfer an existing City of Worcester direct deposit from your former checking account or to set up a new direct deposit complete the attached City of Worcester Direct
Deposit Authorization Form and bring back to Credit Union. To transfer or establish direct deposit of other income sources fill out the attached Other Income
Direct Deposit Authorization Form and give it to your employer. Please note: The initial direct deposits may not occur immediately. Please allow up to 3 pay periods for the funds to be deposited to your new checking account.

FREE Home Financial Banking / Online Bill Pay and setting up Payees
Always have access to your account using the Credit Unions online banking. Using the Credit Unions FREE Online Bill Pay is simply a better way to pay bills. Save money on stamps and trips to the post office. No more checks! Online Bill Pay makes it easy to control your payments and manage your account, schedule single or recurring payments in just a few steps, and you'll never worry about missing a bill or being charged late fees. Simply complete the HFS / Online Bill Pay Application and return to Credit Union to set up your Bill Pay account. For both new Bill Pay users or members who have an existing Bill Pay account from another financial institution, just fill in the fields in the attached Organizer Worksheet for all your new or existing payees and stop by the Credit Union and we will assist you in setting up your payees.

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VISA ATM / Debit Card

Don't get stranded from your finances, have access to your finances 24 hours, 7 days a week. *FREE* unlimited transactions at the Police Headquarters ATM when using your WPDCU ATM/Debit Card. Fill out the attached <u>ATM / Debit Card Application</u> to sign up for an ATM Card.

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Close your Old Account

Once you have confirmed that your direct deposit has been credited to your new checking account at the Credit Union and / or your Bill Pay payees have been set-up and have been deducted from your new checking account you should:

Make sure all outstanding check have cleared. Close your account. You can visit the branch and do this is person or you can complete the <u>Account Closing Request</u> and mail it in. Destroy all remaining checks, deposit tickets, ATM and debit cards for your old account.

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Organizer Worksheet

Use this worksheet to gather information you'll need to make switching your checking account to the Credit Union simple.

Worcester Police Department Credit Union Information

<u>Worcester Police Department Credit Union, 400 Grove Street, Worcester, MA</u> Name and Address



<u>211387130</u> Routing / ABA Number		
Your Credit Union account number:	(include zeros on direct deposit forms)	
Previous Bank Information		
Bank Name and Address	Account Number(s)	
Direct Deposit Information — Do you have, or wish to have, any deposits from your employers, directly deposited into your WPDCU checking account?		
Employer Name	Address	
Employer Name	Address	

Bill Pay Payees

New or existing payees you would like to set up using WPDCU's Online Bill Pay Service. The Credit Union will set up all payees for you, and then afterwards you will be responsible for scheduling all your payments. (Single payments and recurring payments.)

Payee Name	Payee Address	Account #	Payee Phone #

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Payee Name	Payee Address	Account #	Payee Phone #

<u>City of Worcester</u> Direct Deposit Authorization Form

Michael V. O'Brien City Manager CITY OF WORCESTER, MASSACHUSETTS

Thomas F. Zidelis
City Treasurer & Collector of Taxes

John P. Pranckevicius, CPA Chief Financial Officer Michael D. Conrad Assistant Treasurer & Collector

Administration & Finance Treasurer & Collectors Division

YOUR BANK NAME: Worcester Police Department Credit Union
BANK ADDRESS 400 Grove Street, Worcester, MA 01605
CHANGE EXISTING DIRECT DEPOSIT: NEW:
TYPE OF ACCOUNT: Checking
TRANSIT ROUTING NUMBER YOUR ACCOUNT NUMBER
2 1 1 3 8 7 1 3 0
TYPE OF DIRECT DEPOSIT: FULL AMOUNT (Net Check) (Please check one)
PARTIAL: Amount of partial \$
I hereby authorize the City of Worcester to deposit my net pay at the financial institution(s) named above. I understand that the City of Worcester may cause my account to be adjusted to the extent necessary to correct any over-deposit. I agree to hold the above named financial institution harmless for any erroneous deposits or adjustments not caused by the financial institution.
EMPLOYEE NAME:
EMPLOYEE SIGNATURE:
DATE: Soc. Sec.#: Contact Phone:
It is understood that this agreement may be terminated by me at any time by written notification to the City of Worcester. Any such notification to the City of Worcester shall be effective only with respect to entries initiated by the City of Worcester after receipt of such notification and a reasonable opportunity to act on it. Any such notification to the receiving Bank by the employee is unacceptable. The receiving

PLEASE ALLOW 2 PAY PERIODS OF TESTING PRIOR TO THE DIRECT DEPOSIT COMMENCEMENT TO VERIFY THE INFORMATION INDICATED ABOVE. DURING THE TESTING PERIODS, YOU WILL RECEIVE A PAYCHECK.

Bank may terminate this agreement by written notice to the employee for just cause.

Other Income Direct Deposit Authorization Form

Use this form to request direct deposit of your pay to your Worcester Police Department Credit Union checking account. You will need to provide this information to your employer with any other additional information and authorization they need to initiate the deposit. Please contact your employer's payroll department if you have any questions about their process.

Direct Deposit Authoriza		
I hereby authorize (company		, to deposit my
		to hold the below named financial institution
harmless for any erroneous d	eposits or adjustments	not caused by the financial institution.
Employee Name		
Social Security #		
Address		
City	State	Zip Code
Your Credit Union Name: Wor	rcester Police Departm	ent Credit Union
Credit Union Address: 400 Gr	ove Street, Worcester,	MA 01605
Worcester Police Department	Checking Account #:_	
Worcester Police Department	Credit Union Routing #	‡: <u>211387130</u>
notification to my employer.	Any such notification to ed by my employer afte	nated by me at any time by written o my employer shall be effective only or receipt of such notification and a
Account Owner Signature		Date

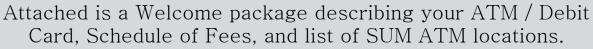


Account Closing Request

Use this form to request that the account(s) you currently have at your former bank or credit union be closed and any remaining funds sent to you. Prior to closing your accounts, consult with your former financial institution to determine if there are any fees associated with closing your account. Please remember to keep enough funds in the account until your last check or ATM transactions have cleared. You can also visit your former financial instruction to close out your accounts.

To Whom It May Concern: Date: This letter informs your that I / we would like to close the account(s) listed below. Please send a check to me at the address listed below for any remaining funds in the account(s). If you have any questions regarding this request, please contact me at the phone number or address listed below. Thank you. Please close the following accounts: Account Owner(s) Name Checking # Savings # Account Owner(s) Name Account Owner(s) Name Account # Please contact me if you have any questions about this request. Address City Zip Code State Phone # Thank you for processing this request immediately. Account Owner Signature Date Account Owner Signature Date

ATM / Debit Card Application





Applicant:		
Account Number(s):		
Name:		
Address:		
City: State	Zip	
Home Phone Number:		
Social Security #:		
Date of Birth:		
Employer:		
Co-Applicant:		
Name:		
Address (if different from above)		
City State		
Home Phone Number:		
Social Security #:		
Date of Birth:	 _	
Employer:		
and conditions governing the services, including an information is accurate and authorizes the financial any necessary means now and in the future as long	equest(s) the described services and agrees to the terms by fee and charges. The undersigned agree(s) that all l institution to verify credit and employment history by g as the individual is a member and/or has any outstanding ation of a credit report by a credit reporting agency. Union to transfer funds in the	
Account Owner Signature	Date	
Account Owner Signature	Date	
Official Use Only Oate Received: Regulation E (Y/N): Approved (Y/N):		
Processed By:		

Online Banking / Bill Pay Sign Up Form



Request Date	
Account Number	_
Email Address	
First Name	
Middle Name	
Last Name	
Street Address	
City	-
State	-
Zip	_
Date of Birth (mm/dd/yy)	-
Application For: HFS O Bill Payer O Both O	
Choose your CASE SENSITIVE HFS PIN (7-15 alpha and nurcharacters). Each PIN must contain at least 1 alpha and 1 nurcharacter. It doesn't have to be the same as your CU Passwo	meric
Member Signature:	
Your request will be processed within two business days. Do not write your PIN down on your membership card whaccess. It is your responsibility to keep your PIN private. Worcester Police Department Credit Union is not responsible cess to your account due to unsafe precautions on your part. If you do not use your account for 90 days, Worcester Figure 1.	ole for unauthorized ac-

For WPDCU use only

Menu 20 _____

ALL suffixes Run Code 2

Accepted By: _____

Menu 28 _____ E Mail Add To Spreadsheet_____

Approved By: _____ Web Code: W

Union has the right to disable your account. If you wish to regain access, simply submit this completed sign up form again. By submitting this form, you agree to the conditions set forth on this page. By agreeing to the conditions of Home Financial Services you agree to receive a monthly e-statement in place of a quarterly paper statement. Worcester Police Department Credit Union has the right to request additional information for positive member identification. You must be at least 18 years old to sign up for HFS.

Date Submitted: _____ Bill Payer____

Online Banking / Bill Pay Cheat Sheet

Once the Credit Union sets up your Online Banking and Bill Pay account use this Cheat Sheet to remember your password, security phrase / image, and Security Questions.

Account ID:	
Online Banking Password:	
Security Image Description:	
Personal Phrase:	
Home Financial Service / Online Banking	g Security Questions:
Question # 1	Answer # 1
Question # 2	Answer # 2
Question # 3	Answer # 3
Online Bill Pay Security Questions:	
Question # 1	Answer # 1
Question # 2	Answer # 2
Question # 3	Answer # 3

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