

Form 2: Automatic Payment Authorization

Use Form 2: Automatic Payment Authorization Form to request the transfer of your automatic payment(s) to your First Western Bank account, or to establish a new automatic payment from your new First Western Bank account.

Please allow sufficient time for your first payments to be activated. A voided check may be required.

Attention: (Enter the company you want payments directed to)

Name

Address

City

State

Zip Code

From: (Enter your personal information here)

Customer Name

Account Number

Customer Address

City

State

Zip Code

Phone Number

To Whom It May Concern,

I have recently switched financial institutions. Please redirect my automatic payments from my old account and begin withdrawing from my new First Western Bank account indicated below.

Effective: ☐ Immediately ☐ Beginning ____ / ____ / ____

Pay: ☐ Total Amount ☐ \$

New Account Information: (Enter your First Western Bank information below)

First Western Bank Routing Number

091310440

Account Number

☐ Checking ☐ Savings

Signature

Date