



## IT'S A STREAMLINE SWITCH! Authorization to Close Account Form

**Instructions:** Complete this authorization to close accounts with other financial institutions and have funds transferred to your OUR Credit Union account. Print one authorization for each financial institution. Remember to destroy old checks along with ATM/Debit Cards, etc.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Financial Institution Name

\_\_\_\_\_  
Financial Institution Street Address

\_\_\_\_\_  
City, State and Zip

\_\_\_\_\_  
Attention To

Please close my account(s) with your financial institution:

Account Numbers: \_\_\_\_\_

Account Holders: \_\_\_\_\_

ID Verification (last four digits of your SSN): \_\_\_\_\_

Send a check for the remaining balance(s) to my new account at:

**OUR Credit Union**  
3070 Normandy Rd  
Royal Oak, MI 48073

Routing Number: **272-484-373**

Account Number: \_\_\_\_\_

I have also made arrangements to discontinue the direct deposit and automatic withdrawal of funds from my account(s) with your financial institution.

If you have any questions about this request, please contact me during the DAY/EVENING (circle one) at (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_

Thank You,

\_\_\_\_\_  
Account Holder 1 Signature

\_\_\_\_\_  
Account Holder 2 Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Account Holder 1 Print Name

\_\_\_\_\_  
Account Holder 2 Print Name

\_\_\_\_\_  
Date

