



Account Change of Address Form

Regardless of where you are moving, we want to make your move easier. When you know your new address, complete this change of address form, tell us the effective date, account numbers you'd like changed and mail or deliver this form to us. We'll update our records so that your statements and other correspondence are sent to your new location after the move.

Customer Name _____ CIF _____
 SSN or TIN _____ Effective Date _____

Note: PO Box must have a physical address.

Update Mailing Address		Update Physical Address	
Street		Street	
City		City	
State		State	
Zip		Zip	
Home Phone			
Work Phone			
Cell Phone			
Email Address			

Accounts Effected - If left blank, all associated accounts will be changed.

Checking	
Savings	
Certificate of Deposit	
IRA	
Holiday Club	
Loan	
Safe Deposit Box	
Trust Department	
NB Financial Svs.	
NBI Stockholder	
MC / Visa / Debit Card	

Customer Signature _____ Date _____

Office Use Only

Method Used to Verify Signature (check one)

Signature Card	
ID used in CIP	
Posted Check	
Known Customer	

Bank Representative Signature _____ Date _____ Branch _____