



STEP 4. Authorization to Close Account

Instructions: Complete this authorization to close accounts at other financial institutions and have funds transferred to your **Scenic Community Credit Union** account. Print one authorization for each financial institution where you have accounts. Remember to destroy old checks and your old ATM and debit cards.

_____ Date

_____ Bank/Other Financial Institution Name

_____ Address

_____ City/State/Zip

To Whom It May Concern:

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

Name _____

Address _____ City _____ State _____ Zip _____

Account Numbers: _____

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

Scenic Community Credit Union
P.O. Box 1058
Hixson, TN 37343

Routing Number: 261388325 **New Account #** _____

If you have any questions about this request, please contact me.

_____ (Phone Number). Day Evening

Thank you.

_____ Account Holder 1 Signature

_____ Date

_____ Account Holder 2 Signature

_____ Date