

Welcome to Torrington Savings Bank



For over 150 years, TSB has developed a tradition of engaging our communities, building stability, and dedication to our customers.

We know that the process of switching banks isn't always easy, which is why we put together this simple switch kit.

STEP

Open Your Torrington Savings Bank Account

Start enjoying the benefits of your Torrington Saving Bank account today. You can open your account online or by stopping by your local branch.

Don't forget to enroll in Online Banking to gain 24-hour access to features that help you manage your finances.

STEP 2

Transfer Direct Deposit

To set up your direct deposit, simply complete the form on page 3 and submit it your employer or other organization to quickly and safely deposit your income check.

To update or enroll in direct deposit for Social Security payments, call the Social Security Administration at 1-800-333-1795 or visit GoDirect.gov/gpw.

3

Transfer Automatic Payments

This is one of the most important steps in making a smooth switch to TSB. Inform companies to have payments (i.e. mortgage, insurance premiums, gym memberships, etc.) automatically deducted from your new Torrington Saving Bank account. We recommend having a few recent bank statements available to review to ensure nothing is overlooked when completing the form on page on 4.

STEP 4

Close Your Old Accounts

Before you close your old account, be sure all outstanding checks and ATM/debit card transactions have cleared. Confirm direct deposits and automatic withdrawals are appearing on your TSB account statement.

Complete an Authorization to Close Form (page 5) and submit it to your former bank or reach out to them for their process.



Need Further Assistance?

Our experienced team of knowledgeable bankers are here to greet you with a smile and provide you with the tools you need to meet your financial goals. If you have any questions or concerns during this process, stop in or **contact us at (860) 496-2152 or visit TorringtonSavings.Bank.**

STEP 2

Authorization for Automatic (Direct) Deposit

Company Name:					
to correct an erroneous credit entry to r	ove) to initiate credit entries and, if necessary, to initiate any debit entries /our account at the DEPOSITORY (identified below), for the purpose of account. I/We acknowledge that the origination of these transactions mu	ıst			
Routing Number: 211174165	☐ See attached voided check/draft or deposit slip)				
Account Number:	Checking				
☐ New Authorization ☐ Change	o Previous 🔲 Termination				
I/We understand that this authorization replaces any previous authorization and will remain in full force and effect until the COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the COMPANY and DEPOSITORY a reasonable opportunity to act on it.					
Primary Name (Print or Type):					
Joint Name (Print or Type):					
Primary Signature:	Date:				
Joint Signature:	Date:				

Find Your Checking Account Number Without A Check

- » Log into Online Banking
- » Click/tap on your Account Name on the Account Summary page
- » Select "Details" and then click "Show Full Account Number" on the Account Details screen



129 Main Street P.O. Box 478 Torrington, CT 06790

(860) 496-2152 TorringtonSavings.Bank STEP 3

Automatic Payment Change Authorization

Complete this form and submit to any company or organization that is automatically withdrawing payments from your existing checking account (insurance, gym membership, mortgage, etc.) This could take up to two weeks to process.					
Name:					
Address:					
City:	State:	Zip:			
Payment Description					
I currently have my payment automatically withdrawn from:					
Name of Financial Institution:					
Withdraw these funds from my (check one)					
☐ Checking ☐ S	Savings				
Please transfer this scheduled transaction to:					
Torrington Savings Ban 129 Main Street Torrington, CT 06790 (860) 496-2152	<				
Routing Number: 211174165	Account Number:				
I authorize you to redirect future automated payment withdrawals to Torrington Savings Bank.					
Signature:		Date:			



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Authorization to Close

To close your checking account(s) at your current bank, please complete this form for each checking account, making copies of this form as necessary. Mail the completed form(s) to your current bank. **Account to Close** Financial Institution Name: Name on Account: **2nd Name** (if joint account): Account Number: Address: ____ City: ______ State: _____ Zip: _____ Please close the following accounts (check all that apply) ☐ Checking Account Number: ☐ Savings Account Number: _____ Other Account Number: Please send a check payable to me/us for the remaining balance in the above-described account to the address on file. Signature: _____ Date: _____



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