

**Checking Account Closure Form**  
Give to previous financial institution



Please close this checking account per my instructions.

"Helping Life Happen"

Previous financial institution \_\_\_\_\_ Account # being closed \_\_\_\_\_

Name(s) on account \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I authorize the closure of my account effective as of this date \_\_\_\_\_

Please transfer any remaining balance to \_\_\_\_\_ Credit Union One \_\_\_\_\_ Account number \_\_\_\_\_

PO BOX 359  
Sandy UT 84091-0359  
Checking \_\_\_\_\_ Savings \_\_\_\_\_

Authorized signature(s) \_\_\_\_\_ Date \_\_\_\_\_

[www.cu-one.com](http://www.cu-one.com)

**Direct Deposit Change Form**  
Give to Human Resources/Payroll department



Please reroute my direct deposit per my instructions.

"Helping Life Happen"

Previous financial institution \_\_\_\_\_ Account # \_\_\_\_\_

Employee's name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I authorize my direct deposit to be routed to Credit Union One.

Checking \_\_\_\_\_

Credit Union One routing number: 324079131 Account number \_\_\_\_\_ Savings \_\_\_\_\_

Authorized signature(s) \_\_\_\_\_ Date \_\_\_\_\_

[www.cu-one.com](http://www.cu-one.com)

**Automatic Payment Change Form**  
Give this to company/payee



Please route this automatic payment per my instructions.

"Helping Life Happen"

Company/payee \_\_\_\_\_ Account # \_\_\_\_\_

Company's address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Payment amount \_\_\_\_\_ Monthly \_\_\_\_\_ Weekly \_\_\_\_\_

I authorize my automatic payment to be debited from my Credit Union One account.

Credit Union One routing number: 324079131 Account number \_\_\_\_\_ Checking \_\_\_\_\_

Effective date \_\_\_\_\_ Credit Union One phone number (801) 561-9951 Savings \_\_\_\_\_

Authorized signature(s) \_\_\_\_\_ Date \_\_\_\_\_