



**CHEMICAL BANK**<sup>SM</sup>

## **Welcome to Chemical Bank!**

Chemical Bank is the third largest bank headquartered in Michigan, with over 90 years of experience serving individuals, families and businesses across the state. Our commitment to Michigan runs deep. Throughout our history, Chemical Bank's hometown approach to banking has remained steadfast and focused on community banking, highlighted by local leadership and decision-making, a devotion to community and personalized service.

We are committed to delivering the guidance and support you need to plan for the future and reach your financial goals. Using a team approach, we provide you with an array of expertise that spans business, personal and investment services. Our experienced professionals spend much of their time working closely with you, and learning about your goals in order to develop personalized financial solutions that will help you meet your needs.

As a Community Bank, Chemical Bank actively invests in our communities on a regular basis. In addition to the financial support we provide to local organizations, our employees dedicate countless volunteer efforts on an ongoing basis. Chemical Bank employees are leaders, members and volunteers of charitable organizations and community events including United Way, Junior Achievement, 4-H clubs, Habitat for Humanity, American Cancer Society, and the Chamber of Commerce, among others.

You can travel across Michigan knowing that there are 129 Chemical Bank offices and 139 ATMs available to you, and all of our offices are open to serve you on numerous Federal Holidays.

We welcome the opportunity to discuss your banking needs and financial goals and show you how our personalized service and local decision-making strengthen our ability to serve you.

Visit [www.chemicalbankmi.com](http://www.chemicalbankmi.com), or call our Customer Support Center at (800) 867-9757 to find a location near you, and see firsthand how banking with Chemical Bank will benefit you.

Member FDIC



# New Account Information

## Instructions:

1. Complete, sign and date this form and bring it to a Chemical Bank near you. To ensure that your personal information remains confidential you should not email forms containing personal information to any company, including Chemical Bank, via the internet.
2. Keep a copy for yourself and make additional copies as necessary.

**Individual Account**

**Joint Account**

**Business Account**

**Primary Applicant Name** \_\_\_\_\_ D.O.B. \_\_\_\_\_

Home Street Address \_\_\_\_\_ Rent \_\_\_\_\_ Own \_\_\_\_\_

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

Home Phone Number \_\_\_\_\_ Work Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Email \_\_\_\_\_ SSN \_\_\_\_\_

Employer Name \_\_\_\_\_

Employed From \_\_\_\_\_ Title \_\_\_\_\_

(If Place of Employment is completed)

Type of Identification Used \_\_\_\_\_ State \_\_\_\_\_

DL or ID # \_\_\_\_\_ Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

\_\_\_\_\_

Signature

## Joint/Secondary Applicant

Name \_\_\_\_\_ D.O.B. \_\_\_\_\_

Home Street Address \_\_\_\_\_ Rent \_\_\_\_\_ Own \_\_\_\_\_

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

Home Phone Number \_\_\_\_\_ Work Phone Number \_\_\_\_\_

Email \_\_\_\_\_ SSN \_\_\_\_\_

Employer Name \_\_\_\_\_

Employed From \_\_\_\_\_ Title \_\_\_\_\_

(If Place of Employment is completed)

Type of Identification Used \_\_\_\_\_ State \_\_\_\_\_

DL or ID # \_\_\_\_\_ Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

\_\_\_\_\_

Signature







## Close Account

### Instructions:

1. Complete, sign and date this form and submit a copy to your previous financial institution after you have opened your new account and all your existing activity has cleared and is switched to your new account at Chemical Bank. To ensure that your personal information remains confidential you should not email forms containing personal information to any company, including Chemical Bank, via the internet.
2. Keep a copy for yourself and make additional copies as necessary.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Bank's Name

\_\_\_\_\_  
Street Address

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

To Whom It May Concern:

Please close my account \_\_\_\_\_ (account number), and send a check for the remaining balance to me at the address listed below.

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Joint Owner Signature

\_\_\_\_\_  
Joint Owner Name (please print)

\_\_\_\_\_  
Street Address

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