

ACCOUNT CHANGE OF ADDRESS FORM

Account Name:

Financial Institution: MAPLE BANK
11660 Theatre Dr No
Champlin, MN 55316

Regardless of where you are moving, we want to make your move easier.

We'll update our records so that your statements and other correspondence are sent to your new location after the move.

When you know your new address, complete this change of address form, tell us when it will be effective, and mail or deliver this form to us.

Our new accounts representative will be glad to help you if you need to order checks with your new address.

ACCOUNT NAME		EFFECTIVE DATE
OLD ADDRESS STREET		
CITY	STATE	ZIP CODE
NEW ADDRESS STREET		
CITY	STATE	ZIP CODE
HOME PHONE	WORK PHONE	SSN OR TIN

Please indicate the accounts to be changed:

Please indicate loan accounts to be changed:

PERSONAL CHECKING
ACCT.# _____
ACCT.# _____

CONSUMER/AUTO
ACCT.# _____
ACCT.# _____

SAVINGS
ACCT.# _____
ACCT.# _____

REAL ESTATE LOAN
ACCT.# _____

TIME DEPOSIT
ACCT.# _____
ACCT.# _____

COMMERCIAL LOAN
ACCT.# _____
ACCT.# _____

MARKET RATE ACCOUNT
ACCT.# _____

BANK CREDIT CARDS
ACCT.# _____
ACCT.# _____

SAFE DEPOSIT BOX# _____

OTHER _____

ACCOUNT NAME:

X _____
Authorized Signer Date

MAPLE BANK
11660 Theatre Dr No
Champlin, MN 55316

TO:

RETURN TO:

CHANGE OF ADDRESS

PLACE
POSTAGE
HERE