Switch Kit

Switching your current financial institution's checking account has been made easy.

Ready, Set, Switch... Follow these easy steps and we'll handle the rest for you!

1 Switch on your HawaiiUSA checking account

Complete and print the entire kit and bring it with you when you open your new HawaiiUSA checking account. If you are not yet a HawaiiUSA member or do not have a checking account with us, you can simply complete our online Membership Application and Account Authorization form to help set-up your account. Then, visit any of our convenient branch locations and let one of our friendly account representatives know that you are ready to make the switch. We'll be more than happy to assist you!

2 Switch over your automatic transactions

Authorization for Direct Deposit

Complete and submit this form to the appropriate company or organization (e.g. employer, other income source) to electronically deposit your regular payments or retirement funds to your new HawaiiUSA checking account. If you have direct deposit from Social Security, please complete US Treasury Form 1199A, or you can visit any of our branches and we'll help fill out the form for you.

Authorization for Automatic Payment/Withdrawal

Complete and submit this form to the company or creditor you are paying to begin/transfer your automatic bill payments, insurance payments, etc. from your current checking account to your new HawaiiUSA checking account. While the payment transfers are taking place, you may pay those bills and other bills using our free Online Bill Pay service.

3 Switch off your previous account

Request to Close My Account

Complete and send this form to your previous financial institution to instruct them to close your account(s) and receive any remaining balances. Please allow time for any outstanding checks, final direct deposits and/or automatic withdrawals to clear from your current account(s). Remember to destroy any old checks, ATM/debit card, and deposit slips.

For more information about our Switch Kit, please call our Member Service Center at (808) 534.4300 (on Oahu) or toll-free at (800) 379.1300.

Note: To open a checking account, you must first establish your HawaiiUSA membership with a minimum deposit of $5.00 in a basic share savings account. Some employers, businesses, or other organizations may have additional requirements to process your request.

HawaiiUSA FEDERAL CREDIT UNION *Life matters.*

AUTHORIZATION FOR DIRECT DEPOSIT

Please complete a separate form for each employer/income source.

Employer/Other Income Source Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Your Personal Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Social Security #: _____

I hereby authorize direct deposit to my new share draft checking account at :

HawaiiUSA FCU
at 1226 College Walk,
Honolulu, Hawaii 96817.

Please arrange direct deposit to my HawaiiUSA FCU account as follows:

HawaiiUSA FCU routing #: 321379410

HawaiiUSA FCU account #: _____
(Your 11-digit MICR #)

Amount to be deposited:

☐ Entire net pay

☐ Specified amount of $ _____

Signature: _____ Date : _____

REQUEST TO CLOSE MY ACCOUNT

Please complete a separate form for each financial institution.

Previous Financial Institution Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Account(s) to close:

Account #: _____ Account #: _____

Account #: _____ Account #: _____

Account #: _____ Account #: _____

Please process and forward any remaining funds in the account(s) by check to the address below. If you have any questions, please contact me in writing or by phone.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____

Social Security #: _____

This is to inform you that I am closing my account(s) at your institution. Thank you for your immediate attention to this matter.

Signature : _____ Date: _____

Co-Signer Signature : _____ Date: _____

AUTHORIZATION FOR AUTOMATIC PAYMENT / WITHDRAWAL

Please complete a separate form for each automatic payment.

Payee Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Account/Policy Number: _____

Your Personal Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Social Security #: _____

Effective immediately, I hereby authorize automatic payment from my new share draft checking account at HawaiiUSA FCU at 1226 College Walk, Honolulu, Hawaii 96817. Please arrange my automatic payment to come from my HawaiiUSA FCU account as follows:

HawaiiUSA FCU routing #: 321379410

HawaiiUSA FCU account #: _____
(Your 11-digit MICR #)

Signature: _____

Date : _____

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