



**BON-a-Fide  
Switch Form**

*Moving your account has never been easier. Just print out, fill out, and bring it with you when you come in to open your new account.*

**NEW ACCOUNT INFORMATION**

Individual Account

Joint Account

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

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

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

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

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

\_\_\_\_\_  
Mailing Address (if different)

\_\_\_\_\_  
Mailing Address (if different)

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
Work Phone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Work Phone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Drivers License Number

\_\_\_\_\_  
Issue Date / Exp. Date

\_\_\_\_\_  
Drivers License Number

\_\_\_\_\_  
Issue Date / Exp. Date

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Place of Birth (City/State)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Place of Birth (City/State)

\_\_\_\_\_  
Mother's Maiden Name

\_\_\_\_\_  
Mother's Maiden Name

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Bringing Account(s) From (Name of Bank)

\_\_\_\_\_  
Bringing Account(s) From (Name of Bank)

\_\_\_\_\_  
Projected Monthly Cash Volumes

\_\_\_\_\_  
Projected Monthly Cash Volumes

Deposited: \_\_\_\_\_

Deposited: \_\_\_\_\_

Withdrawn: \_\_\_\_\_

Withdrawn: \_\_\_\_\_

(Please attach additional pages as needed for multiple signers)

Next to each product/service, please mark those that you currently have with your bank and/or those that you would like to open with Bank of Napa.

Checking / Money Market Account

Visa® Credit Card

Loans

Overdraft Protection

Certificate of Deposit

Online Banking / Online Bill Pay

Savings Account

Safe Deposit Box

Other \_\_\_\_\_

ATM/Visa® Debit Card