

Yes, We make it easy to Switch!

Thank you for choosing First Hawaiian Bank and entrusting us with your financial needs. We want to make the switch easier and help you change your direct deposits, and switch your automatic bill payments to First Hawaiian Bank in a few simple steps:

- STEP 1:** Open a new First Hawaiian Bank checking account online or in-person. If you already have a First Hawaiian Bank account, go to the next step.
- STEP 2:** Complete information on page 1 and the Automatic Payment and Direct Deposit authorization forms on page 2 to request changes needed.
- STEP 3:** After completing the authorization forms, please also follow up with the appropriate company for redirect of automatic payment or your employer for direct deposit change request to ensure it is setup correctly.

If you have further questions, please print and bring your forms to any First Hawaiian Bank branch. We will help you with the rest. **YES, it is that easy!**

MY INFORMATION

Name _____
FIRST M.I. LAST

Home Phone # _____ Mobile Phone # _____

Address _____
STREET

_____ CITY, STATE, ZIP CODE

New Checking Account # with FHB _____

ABOUT MY PREVIOUS FINANCIAL INSTITUTION

Bank Name _____

Address _____
STREET, CITY, STATE, ZIP CODE

Checking Account # _____

Savings Account # _____

Other Account# _____

Other Account# _____

Redirect automatic payments from your old bank account to your new FHB Account

If you have automatic payments (mortgage, phone bill, credit card bills, etc.) deducted from your old checking/saving account at another financial institution, use this form to make payments from your new First Hawaiian Bank Account. Provide a completed form to the company or creditor you are paying and they will change the payment to be paid from your new First Hawaiian Bank account.

AUTOMATIC PAYMENT AUTHORIZATION FORM

Please complete a separate form of each Automatic Payment.



YOUR ACCOUNT INFORMATION

Name _____ Account/Policy Number _____

COMPANY INFORMATION (COMPANY TO BE PAID BY AUTOMATIC PAYMENT)

Company/Agency Name _____

Company/Agency Address _____
STREET, CITY, STATE, ZIP CODE

YOUR NEW AUTHORIZATION PAYMENT ACCOUNT INFORMATION

Bank Name **First Hawaiian Bank** _____

Bank Routing Number _____ Account Number _____

Signature _____ Date _____

Authorization for Direct Deposit with First Hawaiian Bank

Give this form to your employer or payroll manager so they'll know to deposit your paycheck into your new First Hawaiian Bank checking account. If you're receiving Social Security payments, come to any branch and we'll help you fill out the necessary paperwork.

DIRECT DEPOSIT AUTHORIZATION FORM

Please complete a separate form of each Direct Deposit.



YOUR INFORMATION

Name _____ Employee Number _____

EMPLOYER INFORMATION

Company/Agency Name _____

Company/Agency Address _____
STREET, CITY, STATE, ZIP CODE

YOUR CURRENT DIRECT DEPOSIT RECEIVING BANK (LEAVE BLANK IF YOU DON'T CURRENTLY HAVE DIRECT DEPOSIT)

Bank Name _____

Bank Routing Number _____ Account Number _____

YOUR NEW FHB DIRECT DEPOSIT ACCOUNT

Account Number _____

Account Type _____ (Checking, Savings, Money Market Account)

Signature _____ Date _____

First Hawaiian Bank's bank routing numbers are: Hawaii - 121301015 Guam - 121405238 CNMI - 121403065