



Certificate of Deposit

Change in Terms Request Authorization

Today's Date:

Name(s):

Maturity Date:

Certificate Number:

Renew to new term:

Comments or special requests:

I, _____, request and authorize IncredibleBank, a division of River Valley Bank, to change the term of my (our) Certificate of Deposit as indicated above.

To submit your form:

Open your form in Adobe Reader and fill in your information. Save a copy of your completed form to your computer and then click the "Submit" button below to access our secure email server.* You may need to create a free login account to send your message.

Once we receive your form, we will contact you within 24 to 48 business hours to complete the authorization process.

If you have questions regarding this form, please contact us at 1.877.261.4750

**Requests submitted by any other means than those described above may not be honored.*