

CURRENT ACCOUNT INFORMATION

Account Owner(s) \_\_\_\_\_

Account No. \_\_\_\_\_

Address Change: Street \_\_\_\_\_

City/State/Zip \_\_\_\_\_

SUBSEQUENT ACTIONS

I/We authorize the Credit Union to make and accept the following changes to my/our account

**TYPE OF CHANGE** (Please indicate the type of change.)

**Add Account/Service.** Add the account/service designated below.  **Terminate Account/Service.** Terminate the account/service designated below.

**Add Account Owner.** Add the following owner(s) on the account(s) designated below:

The account is a Multiple Party Account:  with Rights of Survivorship  without Rights of Survivorship

**Joint Owner** \_\_\_\_\_ SSN/TIN \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Address \_\_\_\_\_ Prim. Ph. ( ) \_\_\_\_\_ Work Ph. ( ) \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Mother Maiden Name \_\_\_\_\_ DL # \_\_\_\_\_ U.S. Citizen  Other \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_ Email Address \_\_\_\_\_

**Joint Owner** \_\_\_\_\_ SSN/TIN \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Address \_\_\_\_\_ Prim. Ph. ( ) \_\_\_\_\_ Work Ph. ( ) \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Mother Maiden Name \_\_\_\_\_ DL # \_\_\_\_\_ U.S. Citizen  Other \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_ Email Address \_\_\_\_\_

**Remove Account Owner.** Remove the following account owner from the account: \_\_\_\_\_. If required by the Credit Union, removal of a Multiple Party Account Owner requires consent of all account owners, and we will hold Credit Union harmless for actions regarding account access. The removed account owner relinquishes ownership interest including any membership share in the account(s) set forth below. This relinquishment does not affect my/our obligation on any loan account(s).

**POD/Trust Account Beneficiary.**  Replace  Add  Remove the following POD/Trust beneficiary to the following acct(s):  All accounts  Specific \_\_\_\_\_

POD/Trust Account Beneficiary (Name) \_\_\_\_\_ SSN \_\_\_\_\_ Phone# \_\_\_\_\_

Street, City/State/Zip \_\_\_\_\_ DOB \_\_\_\_\_

**Change Trustee**  Add  Remove the Trustee named below on the following account(s):  All Accounts  Designate specific accounts \_\_\_\_\_

**Change Name.** Change my name as follows: \_\_\_\_\_

Former Name: \_\_\_\_\_ DL# \_\_\_\_\_ Copy of Marriage Certificate  YES  NO

**Change Call In/Walk Up Password** \_\_\_\_\_  **Other.** \_\_\_\_\_

ACCOUNTS

Share/Savings \_\_\_\_\_  Share Draft/Checking \_\_\_\_\_

Money Market \_\_\_\_\_  Share Certificate/CD \_\_\_\_\_

Other \_\_\_\_\_

SERVICES

Overdraft Protection (indicate priority)  ATM/Check Card

\_\_\_\_\_  Online Banking

Other \_\_\_\_\_

AUTHORIZATION

I/We agree that the changes on this card amend the previously signed Account card and are subject to the terms and conditions of the membership and Account Agreement, Truth-in-Savings Rate and Fee Schedule, and Funds Availability Policy Disclosure, if applicable, and to any amendment the Credit Union makes from time to time which are incorporated herein. I/We acknowledge receipt of a copy of the Agreements and Disclosures applicable to the accounts and services requested above. If an access card or EFT service is requested and provided, I/we agree to the terms of and acknowledge receipt of the EFT Agreement. I/we authorize the Credit Union to obtain credit reports in connection with this application.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

ATTACH COPY OF DRIVER'S LICENSE(S) HERE.

FOR CREDIT UNION USE ONLY:

Orig. Open date \_\_\_\_\_ Amended by \_\_\_\_\_

Member Sig Verified \_\_\_\_\_ Cr.Rpt Nos. \_\_\_\_\_

Joint#1 SSN issue date \_\_\_\_\_ Jnt#2 SSN issue dt. \_\_\_\_\_

OFAC Joint#1 \_\_\_\_\_ OFAC Joint#2 \_\_\_\_\_

Copy of DL(s) \_\_\_\_\_ Verified by \_\_\_\_\_