



**ACCOUNT SERVICES**

Payroll Deduction/Direct Deposit:

Audio Response:

Overdraft Protection (Indicate transfer priority):

ATM Card:

Debit Card:

PC Access/Internet Banking:

Other:

**TIN CERTIFICATION AND BACKUP WITHHOLDING INFORMATION**

**Under penalties of perjury, I certify that:**

**(1) The number shown on this form is my correct taxpayer identification number,**

**(2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and**

**(3) I am a U.S. person (including a U.S. resident alien).**

**Certification Instructions.** Cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. Cross out item 3 and complete a W-8 BEN if you are not a U.S. person.

**AUTHORIZATION**

By signing below, I/we agree to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Rate and Fee Schedule, 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 Agreement and Disclosures applicable to the accounts and services requested herein. If an access card or EFT service is requested and provided, I/we agree to the terms of and acknowledge receipt of the Electronic Funds Transfer Agreement. **The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

**X**  
 \_\_\_\_\_  
 Signature Date

**X**  
 \_\_\_\_\_  
 Signature Date

**X**  
 \_\_\_\_\_  
 Signature Date

**X**  
 \_\_\_\_\_  
 Signature Date

**FOR CREDIT UNION USE ONLY**

See Account Change Card

See Insurance Beneficiary Card

Date of Membership:

Opened/App'd by:

Member Verification:

Credit Report

Check Verify

PIN Request

Control List Checked by:

Audio Response

PC Access/Internet Banking