

Section 326 of the USA PATRIOT Act requires the Credit Union to verify the identity of all new Credit Union Members. We must also verify the identity of any person added as a signatory to a new or existing deposit account. We must document the information used to verify identity. We may ask existing members to provide or update identifying information as necessary when requesting a new deposit account or applying for a loan or other service.

**Any changes requested on this form will apply to the ownership of all existing savings, certificates, and checking subaccounts (with the exceptions of Individual Retirement Accounts and Health Savings Accounts) under this account number.**

## A. Primary Owner Information Changes

|   |                   |  |   |
|---|-------------------|--|---|
| Action to be Taken: <input type="checkbox"/> Update Address or Other Information (complete only the information that needs to be updated)   |                   |  |   |
| <input type="checkbox"/> Name Change (must provide proof of legal name change such as a copy of marriage license or divorce decree)   |                   |  |   |
| <b>Note:</b> If you also need to remove a joint member, please complete the Remove Joint Owner form in addition to this form. Owner's name on an account should match that individual's name on their Social Security card or Real ID.                                      |                   |  |   |
| Name (First, MI, Last) - Required   |                   |  |   |
| Mailing Address - Street or P.O. Box  |                   | City, State, Zip Code                                  |   |
| Physical Address (if different) - Street  |                   | City, State, Zip Code                                  |   |
| <input type="checkbox"/> Home Phone (with Area code) *  |                   | <input type="checkbox"/> Work Phone (with Area code) * | <input type="checkbox"/> Cell Phone (with Area code) *                                    |
| Drivers License / Photo ID No.  | State of Issue    | Expiration   | <input type="checkbox"/> Email Address (necessary for home banking & emergency contact) * |
| Employer  | Employer Zip Code | Occupation   | Mother's Last Name or Alternative Security Word   |
| If you currently have a UECU checking account, new checks may be needed. If you would like UECU to place a reorder with the same design, please check the box below. Your account will be charged when the order is shipped. <input type="checkbox"/> Requesting new checks |                   |  |   |

## B. First Joint Owner Information Changes

|   |   |  |
|---|---|--|
| Action to be Taken: <input type="checkbox"/> Add (If the owner to be added is currently a beneficiary, they will be removed as a beneficiary.)  |   |  |
| <input type="checkbox"/> Update Address or Other Information (complete only the information that needs to be updated)   |   |  |
| <input type="checkbox"/> Name Change (must provide proof of legal name change such as a copy of marriage license or divorce decree)   |   |  |
| <b>Note:</b> If you also need to remove a joint member, please complete the Remove Joint Owner form in addition to this form. Owner's name on an account should match that individual's name on their Social Security card or Real ID.  |   |  |
| Name (First, MI, Last) - Required   | Date of Birth (if adding new owner)   | Social Security No. (if adding new owner)              |
| Mailing Address - Street or P.O. Box  |   | City, State, Zip Code                                  |
| Physical Address (if different) - Street  |   | City, State, Zip Code                                  |
| <input type="checkbox"/> Home Phone (with Area code) *  |   | <input type="checkbox"/> WorkPhone (with Area code) *  |
| <input type="checkbox"/> Email Address (necessary for home banking & emergency contact) *   |   | <input type="checkbox"/> Cell Phone (with Area code) * |
| <input type="checkbox"/> Email Address (necessary for home banking & emergency contact) *   |   | Mother's Last Name or Alternative Security Word        |
| Drivers License / Photo ID No.  | State of Issue  | Expiration   |
| Employer  | Employer Zip Code   | Occupation   |
| Citizenship<br><input type="checkbox"/> US <input type="checkbox"/> US Resident Alien <input type="checkbox"/> Non-Resident Alien   | If you selected Non-Resident Alien, please include country of citizenship   |  |
| Relationship to Primary Owner   | Additional documentation may be required – please contact the Credit Union. |  |
| If you currently have a UECU checking account, new checks may be needed. If you would like UECU to place a reorder with the same design, please check the box below. Your account will be charged when the order is shipped. <input type="checkbox"/> Requesting new checks <input type="checkbox"/> Requesting new <i>Advantages</i> Visa <i>Debit Card</i> ™ or Quick Cash Card<br>Each cardholder will be able to select their Personal Identification Number (PIN) when calling to activate their new card. |   |  |

## C. Second Joint Owner Information Changes

- Action to be Taken:  Add (If the owner to be added is currently a beneficiary, they will be removed as a beneficiary.)  
 Update Address or Other Information (complete only the information that needs to be updated)  
 Name Change (must provide proof of legal name change such as a copy of marriage license or divorce decree)

**Note:** If you also need to remove a joint member, please complete the Remove Joint Owner form in addition to this form. Owner's name on an account should match that individual's name on their Social Security card or Real ID.

|                                   |                                     |   |
|-----------------------------------|-------------------------------------|---|
| Name (First, MI, Last) - Required | Date of Birth (if adding new owner) | Social Security No. (if adding new owner) |
|-----------------------------------|-------------------------------------|---|

|                                      |                       |
|--------------------------------------|-----------------------|
| Mailing Address - Street or P.O. Box | City, State, Zip Code |
|--------------------------------------|-----------------------|

|  |                       |
|--|-----------------------|
| Physical Address (if different) - Street | City, State, Zip Code |
|--|-----------------------|

|  |  |  |
|--|--|--|
| <input type="checkbox"/> Home Phone (with Area code) * | <input type="checkbox"/> Work Phone (with Area code) * | <input type="checkbox"/> Cell Phone (with Area code) * |
|--|--|--|

|   |   |
|---|---|
| <input type="checkbox"/> Email Address (necessary for home banking & emergency contact) * | Mother's Last Name or Alternative Security Word |
|---|---|

|                                |                |            |
|--------------------------------|----------------|------------|
| Drivers License / Photo ID No. | State of Issue | Expiration |
|--------------------------------|----------------|------------|

|          |                   |            |
|----------|-------------------|------------|
| Employer | Employer Zip Code | Occupation |
|----------|-------------------|------------|

|   |   |
|---|---|
| Citizenship<br><input type="checkbox"/> US <input type="checkbox"/> US Resident Alien <input type="checkbox"/> Non-Resident Alien | If you selected Non-Resident Alien, please include country of citizenship |
|---|---|

|                               |   |
|-------------------------------|---|
| Relationship to Primary Owner | Additional documentation may be required – please contact the Credit Union. |
|-------------------------------|---|

If you currently have a UECU checking account, new checks may be needed. If you would like UECU to place a reorder with the same design, please check the box below. Your account will be charged when the order is shipped.

- Requesting new checks  Requesting new *Advantages* Visa *Debit Card*™ or Quick Cash Card  
 Each cardholder will be able to select their Personal Identification Number (PIN) when calling to activate their new card.

\* Please check box next to preferred contact method

## D. Agreement and Signatures

- I/We certify the information provided is true and correct and authorize UECU to check my/our account, credit, employment history and/or to obtain consumer reports from third parties, including credit bureau reports, in order to determine my/our eligibility for Credit Union accounts and services. I/we understand that UECU may rely on information in this application, consumer and credit bureau reports to make its decision.
- By signing this application, I/we agree to the conditions stated in the Account Agreement and Disclosures, Rate and Fee Schedules, and Credit Union By-laws and Policies, and any amendments to these documents made from time to time which collectively govern my/our membership and accounts.
- A joint account is payable to any account owner. The Credit Union can accept deposits from or process withdrawals for any owner. A joint account is owned jointly with right of survivorship, which means the interest of a deceased account will pass to the surviving owner(s). All joint owners agree to be bound by the terms above and in the Joint Account Ownership Agreement included in the Account Agreement and Disclosures Booklet provided.

**Signatures of all current and new account owners are required to add a new joint owner.** Only one owner is required to sign for address changes. Only the member changing their name is required to sign a name change request. If applicant is under 18 years of age, parent/sponsor must sign child's name followed by parent's/sponsor's initials.

|  |                                   |                |      |
|--|-----------------------------------|----------------|------|
| <b>Primary Member Signature</b> <i>(please sign in ink)</i>      | Name Changes Only - Old Signature | Print Old Name | Date |
| <b>First Joint Member Signature</b> <i>(please sign in ink)</i>  | Name Changes Only - Old Signature | Print Old Name | Date |
| <b>Second Joint Member Signature</b> <i>(please sign in ink)</i> | Name Changes Only - Old Signature | Print Old Name | Date |

**UECU USE ONLY**

|                           |                          |                            |  |
|---------------------------|--------------------------|----------------------------|--|
| Eligible _____ Date _____ | Entered _____ Date _____ | DS Verify _____ Date _____ |  |
|---------------------------|--------------------------|----------------------------|--|