

# Joint Account/Services Application

Note: Each joint new to the account must complete an Identification Form.

## Primary Owner

Primary Owner Name \_\_\_\_\_

Account # \_\_\_\_\_

## Joint Options

I would like to add the following person(s) as joint owner(s) on my account:

**1st Joint** \_\_\_\_\_ SS # \_\_\_\_\_

**To be joint on the following:**

**ALL** accounts/services as selected on my *Member Identification & Account Application*

Or, only as checked:     Savings                       Checking                       Visa Debit Card  
                                   Christmas Club                       Summer Pay Plan

### FOR OFFICE USE ONLY

Number \_\_\_\_\_ PVV \_\_\_\_\_

**2nd Joint** \_\_\_\_\_ SS # \_\_\_\_\_

**To be joint on the following:**

**ALL** accounts/services as selected on my *Member Identification & Account Application*

Or, only as checked:     Savings                       Checking                       Visa Debit Card  
                                   Christmas Club                       Summer Pay Plan

### FOR OFFICE USE ONLY

Number \_\_\_\_\_ PVV \_\_\_\_\_

I certify that I have received and read disclosure, and agree to the terms of the Regular Share Savings, Joint Account Agreement, Checking Account, Consumer Lending Plan, Account Opening Truth-in-Lending, Fee Schedule, Funds Availability (Regulation CC), and Debit card, Banking by Phone, and Online Banking(Regulation E) enclosed and made a part hereof and incorporated herein by reference. Signing below amounts to executing this agreement under seal and undersigned adopts as his/her seal the word "(Seal)" appearing beside his/her signature.

I understand that if I'm applying for a loan product, I give a security interest in my shares (except IRA and other accounts subject to ERISA). I

**acknowledge receiving important information for opening a new account in compliance with the USA Patriot Act. I understand that the identity information I have provided will be verified.**

**Signature of Primary Owner**

**X** \_\_\_\_\_ (Seal)

Date \_\_\_\_\_

**Signature of Joint Owner (1st)**

**X** \_\_\_\_\_ (Seal)

Date \_\_\_\_\_

**Signature of Joint Owner (2nd)**

**X** \_\_\_\_\_ (Seal)

Date \_\_\_\_\_

### FOR OFFICE USE ONLY

ID Verified by:

PRD card submitted     DD card/form submitted    Services set up by:

Approved by:

Date \_\_\_\_\_

Note: Each joint new to the account must complete an Identification Form.

Joint Owner Information			
Social Security #/TIN/EIN		Account #	
		Office Use Only	
First Name	M.I.	Last Name	
Home Phone		Cell Phone	
Home Address		City	State Zip
Mailing Address (if different from above)		Email Address	
Date of Birth	Mother's Maiden Name		Country of Citizenship

Joint Owner Employer Information			
Employer			
Employer's Address		City	State Zip
Work Phone	Ext.	Occupation	

I hereby make application as a joint owner on the above-mentioned account with First Financial Federal Credit Union and agree to conform to the Federal Credit Union Act, NCUA Rules and Regulations, the Credit Union policies, rules, regulations and bylaws, and any amendments thereto. I understand the Credit Union may investigate and verify my credit, employment, income and any other information furnished herein and I authorize them to do so.

Under the penalties of perjury, I certify (1) that the social security number shown on the form is my correct taxpayer identification number and (2) that I am not subject to backup withholding, either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding.

Approval is required prior to being added to any shares/loans of the Credit Union. Every effort is made to provide immediate approval, but in some cases it may take up to 30 days for approval. Should this application be denied, written notification will be sent informing you of the reason we were unable to allow you to be a joint owner on a First Financial FCU account.

<b>Signature of Joint Owner</b> <b>X</b>	Date
(Seal)	

FOR OFFICE USE ONLY			
<b>Social Security # Verification (check all that apply)</b>		<input type="checkbox"/> Previous Bank Account Verification	
<input type="checkbox"/> Card		<input type="checkbox"/> OK:	
<input type="checkbox"/> Non-document:		<input type="checkbox"/> Negative (explain) :	
<b>ID Verification</b>		<input type="checkbox"/> Membership	
<input type="checkbox"/> ID Type:	#:	<input type="checkbox"/> Approved	
Issued Date:	Expiration Date:	<input type="checkbox"/> Denied (reason):	
Place of Issue:	BD:		
<input type="checkbox"/> Non-document:	B:		
Employee Signature:	Branch Mgr. Signature:	Date	