

Membership and Account Application



SF Fire Credit Union

Member #: _____

Account Type:

- Individual
 Joint
 Trust
 UMTA (Uniform Transfer to Minors Act)
 Update of Existing Account

Eligibility:

- Firefighter
 Community
 Related to a Member (Name: _____)

California State Firefighters' Association (Active Membership Number: _____)

- Firefighter
 Associate – Fire Department Employee
 Associate – Vendor
 Student or Explorer

Services:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Checking
(<input type="checkbox"/> Checks <input type="checkbox"/> ATM Debit Card)
<i>If you select Checking, see Appendix 1</i> | <input type="checkbox"/> Money Market
<input type="checkbox"/> Term Certificate
<input type="checkbox"/> Individual Retirement Account (IRA)
<input type="checkbox"/> Health Savings Account (HSA) | <input type="checkbox"/> VISA Credit Card
<input type="checkbox"/> Signature Loan
<input type="checkbox"/> Student Loan
<input type="checkbox"/> Recreational Vehicle Loan | <input type="checkbox"/> Auto/Motorcycle Loan
<input type="checkbox"/> Home Loan
<input type="checkbox"/> Home Equity Line of Credit
<input type="checkbox"/> Reverse Mortgage |
|---|---|---|---|

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth and other information that will let us identify you, including your driver's license or other valid ID documents.

Primary Member

Last Name:		First Name:		Middle Initial:	Date of Birth:
Social Security Number:	Driver's License/State ID:	Mother's Maiden Name:		Home Phone:	
Residence (Address, City, State, Zip):				Cell Phone:	
Mailing (Address, City, State, Zip):				Work Phone:	
Employer (City, State, Zip):				Email Address:	

Joint Member

Last Name:		First Name:		Middle Initial:	Date of Birth:
Social Security Number:	Driver's License/State ID:	Relationship to Primary:		Cell Phone:	
Residence (Address, City, State, Zip): <input type="checkbox"/> Same as Primary				Work Phone:	
Employer (City, State, Zip):				Email Address:	

Primary Beneficiaries

Beneficiary Name:	Address:	Date of Birth:	Relationship:	SSN:	Share %:
Beneficiary Name:	Address:	Date of Birth:	Relationship:	SSN:	Share %:

Contingent Beneficiaries

Beneficiary Name:	Address:	Date of Birth:	Relationship:	SSN:	Share %:
Beneficiary Name:	Address:	Date of Birth:	Relationship:	SSN:	Share %:

Note: Beneficiary designation(s) is not to be used in conjunction with Trust Accounts or IRAs. If no share percentages are given, funds will be disbursed evenly between individuals or entities listed as beneficiaries.

For Credit Union Use Only	
Member Number:	Share ID Number:
Membership Officer:	ID Verified by:
ChexSystems:	Date:

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SF Fire Credit Union

Request for Tax Payer Information

Part I : Enter you Taxpayer Identification Number (TIN). For individuals, this is your Social Security Number (SSN). For UTMA accounts, provide the SSN for minor. For Fiduciary and Living Trust Accounts, provide SSN of Trustee or Employer Identification Number (EIN) of Trust.

T.I.N. (Social Security Number): _____ **E.I.N. (Employer Identification Number):** _____

Part II : For payees exempt from backup withholdings, see IRS instructions to Part II available from a Credit Union employee.

Part III : Under penalties of perjury, you certify that (1) The number shown on this form is your correct TIN, and (2) You are not subject to back up withholding.

You agree to cross out Part II above and check the box if you have been notified by the IRS that you are currently subject to back up withholding because of underreporting interest or dividends on your tax returns.

Signature: _____ **SIGN HERE** **Date:** _____

Trust Information

Name of Trust: _____ **Agreement Date:** _____

Name of Trustor: _____

I / We declare under penalty of perjury and as provided under the California Probate Code Section 18100-5 that I / we am / are qualified and have the power to act and am / are properly exercising the powers under the above names trust.

Signature of Trustee: _____ **Date:** _____

Signature of Trustee: _____ **Date:** _____

Uniform Transfers to Minor Act (UTMA) Information

Funds to Remain in Trust Until Age: _____

Appointment of Guardian (optional): In the event that the custodian originally named shall be unable to act as custodian, declines to accept the custodianship, resigns, dies, or becomes legally incapacitated, the person named below is designated successor custodian.

Name: _____ **Address:** _____ **Primary Phone:** _____

Signature of Custodian: _____ **Date:** _____

Witness: _____ **Date:** _____

SF Fire Credit Union deposits are insured by American Share Insurance, the largest provider of private share insurance. Each SF Fire Credit Union deposit and certificate account is insured up to \$500,000.



This institution is not federally insured, and if the institution fails, the Federal Government does not guarantee depositors will get back their money. Accounts with this institution are not insured by any state government.



Proxy: I appoint the Board of Directors of SF Fire Credit Union to appoint a Proxy to represent me at all meetings of the members of the Credit Union. The Proxy will vote for me on all questions and elections coming before said meeting, to give consent and in other ways to act in my place and stead. This Proxy shall remain in force for three years from today unless revoked by me in writing or revoked by subsequent Proxy. This Proxy will be withdrawn from any meeting, which I attend and vote in person.

By signing below, I/we agree to the terms and conditions of the Truth in Savings(TIS)/Rate/Fee Schedule and to any amendments thereto which are by this reference incorporated in their entirety into the disclosure. I/we agree to be bound by the terms and conditions of the disclosures and application. I/we understand the credit union will mail the TIS, Fee and Rate Schedule within 10 days of receipt of this application. I/we authorize you to gather any credit, checking account and employment information deemed appropriate from time to time.

Signature: _____ **SIGN HERE** **Date:** _____

Signature: _____ **Date:** _____

For Credit Union Use Only

Member Name: _____ Member Number: _____

Checking Account – Overdrafts and Overdraft Fees



SF Fire Credit Union

Member #: _____ - _____

An overdraft occurs when you do not have enough money in your account to cover a transaction and SF Fire Credit Union pays it anyway. There are several ways we can cover your overdraft:

FREE Overdraft Protection

We attempt to cover your overdraft transactions by first using available funds in your Regular Savings accounts – and if no funds are available, then from your Money Market accounts. There are NO FEES associated with using your SF Fire Credit Union accounts to cover overdrafts. (Note: While there is NO FEE associated with using your Visa® as a source of overdraft protection, finance charges on the overdraft amount will begin accruing immediately.)

Using a Deposit Account or Visa as a Source of FREE Overdraft Protection

- **Deposit Accounts** (Savings or Money Market): Each SF Fire Credit Union deposit account can have up to six electronic transfers per month * (meaning transactions not performed in-person, with a Call Center representative or at an ATM) – *as long as there are available funds in the account.*
- **Visa Credit Card:** Any SF Fire Credit Union Visa that you designate as a source of overdraft protection can be used to cover an unlimited number of overdraft transactions in a given month – *as long as there is available credit.*

Designating Your Sources of FREE Overdraft Protection

When attempting to cover your overdraft transactions, we'll first seek available funds in your primary SAVINGS account and then primary MONEY MARKET account. If you would like to change this order – or use different accounts – please indicate this below:

Standard Order	Source of Overdraft Protection	Your Preferred Order (please indicate 1,2,3,4... or NO)
1	Regular Savings	_____
2	Money Market	_____
(optional)	Visa Credit Card	_____
(optional)	Other SF Fire Account: _____	_____

NO, THANKS. I wish to decline free overdraft protection.

Supplemental Overdraft Services (Courtesy Pay)

SF Fire Credit Union does offer a Courtesy Pay Program that can cover overdraft transactions when the accounts that have been designated to use for FREE Overdraft Protection Service have no available funds.

SF Fire Credit Union authorizes and pays overdrafts through the Courtesy Pay Program at our discretion. We base that decision on the length of your membership as well as your account(s) with us being in good standing. You will be notified when you become qualified for Courtesy Pay, and until that time transactions requiring supplemental overdraft services will be declined.

Fees Associated With Courtesy Pay

- You will only be charged a fee of **\$25** when your account has an overdraft which will take your account negative \$10 or more. *
- You will only be charged the \$25 fee on the first overdraft transaction of each day. Additional overdraft transactions posted on the same day will not be charged a fee.

Authorization to Pay Overdrafts Using Courtesy Pay

YES, I want to "Opt-In" to courtesy pay on overdrafts for checks, transactions using my checking account number, and SF Fire Credit Union online banking bill payments.

Additionally, I want to "Opt-In" to courtesy pay on overdrafts for transactions using my debit card or debit card number.

NO, I do not want to use courtesy pay to overdraft any of my transactions. I understand that overdrafts not covered by free overdraft protection will be declined – and that this may result in non-sufficient funds (NSF) fees as well as debit card transactions being declined at the point of purchase.

Signature: _____

SIGN HERE

Date: _____

Signature: _____

Date: _____

* E-alerts within Online Banking can help you keep track of account balances or how many transfers remain on your deposit accounts. Log in or contact us to activate.