

Account Change Request

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ElementFCU.org

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My Name:	My Account #:			
I want to add other accounts and services	s (list all here):			
I Need T	o Change My Address and/or My Phone Numbers			
My New Address is :				
My Old Address is:				
My New Home or Cell Phone is:	My New Work Phone is:			
I Need to Add a	a Joint Owner To My Account (with rights of survivorship)			
Joint Owner Name:	Social Security #:			
Joint Owner Address:	Phone #:			
This Person is Joint on the following accou	ints:			
Joint Owner Signature:	Joint Owner Birthdate:			
l Nee	d to Remove a Joint Owner From My Account			
the Credit Union harmless for actions rega share in the account(s). This relinquishment	r. I understand removal of a joint owner requires consent of all account ow arding access. The removed owner relinquishes ownership interest including to does not affect my/our obligation on any loan account(s). Signature:	any membership		
	, 20 before me			

_____, the undersigned On ____, known to me (or satisfactorily proven) to be the person whose officer, personally appeared ____ name is subscribed to the within instrument, and acknowledged that __ _____ executed the same for the purposes therein contained. In witness whereof, I hereunto set my hand and official seals.

Notary Public: _____

I Need To Add or Remove a Beneficiary

Add This Beneficiary: _____ Remove This Beneficiary: _____

Address of New Beneficiary: _____

Beneficiary Social Security #: ______ Beneficiary Birthdate: _____

I Need to Close My Element Account

Please close my Element FCU account. The reason I need to close this account is (check all that apply):

O Moving out of area O Poor service experience O Not enough service options O Other: _____

Final Authorization								
I/We agree that changes on this form amend the previously signed Membership form, and I/we are subject to all terms and conditions of membership in Element Federal Credit Union.								
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My Signature	^	^ Date	Co-Owner Signature	^ Date				