

# TACU CREDIT UNION

## Checking Account Application

Date: \_\_\_\_\_ Savings Account Number: \_\_\_\_\_

**Member's Name:** \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Business Phone: ( ) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

State of Issuance: \_\_\_\_\_ Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Joint Member's Name:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

State of Issuance: \_\_\_\_\_ Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

### *Terms and Conditions*

I/We understand and agree that payment of any withdrawal shall be subject to the bylaws of TACU Credit Union, any restrictions or limitations imposed by the applicable law, and these and other terms and conditions disclosed for this account as amended from time to time. I/We grant TACU Credit Union a security interest in this account to secure all obligation any of us may owe to TACU Credit Union, now or in the future, and consent to the TACU Credit Union applying any amount held in the account to the debt(s) to TACU credit Union of any party(ies) to the account. This account is nontransferable and shall earn dividends as determined by the policy of the TACU Credit Union board of directors. Any P.O.D. or joint account survivorship feature of this account shall apply without regard to any requirement to survive an event by any specified period.

### *Taxpayer Identification Number & Certification*

Under penalty of perjury I certify that: **(1)** \_\_\_\_\_ is my correct taxpayer identification  
Social Security Number

number (or I am waiting for a number to be issued to me); and **(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 (IRA) 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). **(You must cross out item (s) above if you have been notified by the IRA that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.)**

(Continued on next page)

\_\_\_\_\_  
Member's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Joint Member's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness's Signature

\_\_\_\_\_  
Date

**If your signature is not witnessed by a credit union employee, this form needs to be notarized.**

State of \_\_\_\_\_

County of \_\_\_\_\_

Subscribed and sworn to before me by the above signed

on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_