

200 Diversion St., Rochester Hills, MI 48307 Member Account Agreement

Account No.

IMPORTANT ACCOUNT OPENING INFORMATION:

Federal law requires us to obtain sufficient information to verify your identity. You may be asked several questions to provide one or more forms of identification to fullfill this requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

I/we hereby make application for membership in the Chief Financial Federal Credit Union and agree to conform to its laws and amendments thereof and subscribe for at least one share.

Owner Name (1):		Phone			
Address			State	Zip	
Social Security #					
Drivers License #					
Employer	Work Phone				
Other ID used to establish account					
Membership Eligibility:					
Owner Name (2):		Phone			
Address				Zip	
Social Security #	Date of Birth	Mother's Maid	en Name		
Drivers License #	Email Address				
Employer					
Other ID used to establish account					
Membership Eligiblity:					

TIN CERTIFICATION AND BACK WITHHOLDING INFORMATION

Under penalities of perjury, I certify that: (1) The number shown on this is my correct taxpayer identification number, 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 (IRS) 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).

Certification instructions: You must cross out item 2 above is you haven notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. Cross out item 3 and complete a W-8 BEN if you are not a U.S. person.

Signature of Owner Name (1):		Date:	
SHA	ARE ACCOUNT AGREEME	NT	
Chief Financial Federal Credit Union is hereby authorized to rec of any business for this account. If applicable the joint owners now paid on shares, or heretofore or hereafter paid on shares thereon, are and shall be owned by them jointly, with right of s any of them or the survivor or survivors shall be valid and disch Any or all said joint owners may pledge all or any part of the sh The right or authority of the credit union under this agreement notice to said credit union which shall not affect transactions th authorize the credit union to investigate credit and employmer Except as otherwise provided by law or other documents, each undersigned personally and as, or on behalf of, the account ow membership or entrance fee, and agree to the terms of, and ac Disclosure, Funds Availability Disclosure and Fee Schedule.	of this accounts, hereby agree by any or all of said joint owne survivorship and be subject to harge said Credit Union from an hares in this account as collater t shall not be changed or termi heretofore made. Chief is auth nt history and obtain reports fr of the undersigned is authorits wner(s) agree to the by-laws of	with each other and with said Credit U rs to their credit as such joint owners w the withdrawal or receipt of any of ther y liability for such payment. al security to a loan or loans. nated by said owners, or any of them ex iorized to obtain credit information. Th om consumer reporting agency(ies) on ed to make withdrawals from the accou the credit union, including any required	nion that all sums <i>i</i> th all accumulation n, and payment to xcept by written te undersigned them as individuals. unt(s). The ment to pay a
Signature of Owner Name (1):		Date:	
Signature of Owner Name (2):	Date:		
Office Use Only:			
Account Opened by	OFAC (1)	OFAC (2)	
Member Approved by			