

EAST RIVER FEDERAL CREDIT UNION MEMBERSHIP APPLICATION

Member Name:	Account #:
Street:	SSN/TIN:
City/State/Zip:	Driver's Lic. No:
Home Phone:	Date of Birth:
Work Phone:	Mother's Maiden Name:
Employment:	
Eligibility for Membership:	

ACCOUNT OWNERSHIP

Joint Owner:	SSN/TIN:
Street:	Driver's Lic. No:
City/State/Zip:	Date of Birth:
Home Phone:	Mother's Maiden Name:
Work Phone:	

Joint Owner:	SSN/TIN:
Street:	Driver's Lic. No:
City/State/Zip:	Date of Birth:
Home Phone:	Mother's Maiden Name:
Work Phone:	

TIN CERTIFICATION AND BACKUPWITHOLDING INFORMATION

By signing below, I certify, in accordance with the IRS W-9 instructions provided by the Credit Union and under penalties of perjury, that the Social Security number (SSN)/Taxpayer identification number (TIN) shown is my/the correct identification number and that I am NOT, unless designated below, subject to backup withholding because I have not been notified that I am subject to backup withholding as a result of a failure to report all dividends or interest, or because the IRS has notified me that I am no longer subject to backup withholding.

AUTHORIZATION

By signing below, I/we agree to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Rate and Fee Schedule, Funds Availability Policy Disclosure, if applicable, and to any amendment the Credit Union makes from time to time which are incorporated herein. I/We acknowledge receipt of a copy of the Agreement and Disclosures applicable to the accounts and services requested herein. If an access card or EFT service is requested and provided, I/we agree to the terms of and acknowledge receipt of the Electronic Funds Transfer Agreement. ***The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.***

X		X	
Signature	Date	Signature	Date
X		X	
Signature	Date	Signature	Date



EAST RIVER FEDERAL CREDIT UNION
 PO Box 31
 Madison, SD 57042
 (605) 256-8145 or (800) 667-6039
www.eastriverfcu.com

**Member Identity Information
& Verification Card**

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

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 to you: When you open an account, we ask for your legal name, mailing and residential address, date of birth, government issued photo ID, and other information that will allow us to identify you.

IDENTITY INFORMATION

Account #: _____ **SFX:** _____

Legal Name: _____ **Date of Birth:** _____

Mailing Address: _____ **City/State/Zip:** _____

- Residence Residential/Physical Address:
(if different than address given above)
- Business

Occupation (for individual): _____ **Employer:** _____

Nature of Business (for business): _____

DOCUMENTARY VERIFICATION

Individuals: Please submit a copy of your driver's license. Your account will not be opened unless we receive this copy at the time of opening.
If a minor: Please submit a copy of birth certificate or social security card. Your account will not be opened unless we receive this copy at the time of opening.

GOVERNMENT ISSUED IDENTIFICATION NUMBER

SSN/EIN: _____

If you do not have a SSN/EIN you must provide AT LEAST ONE of the following:

Individual Taxpayer Identification Number : _____ Alien Identification Number: _____

Passport Number: _____ Country: _____

Other Government Issued Document No.: _____ Country: _____
 (with photograph or similar safeguard)

Describe Document: _____

CREDIT REPORT AUTHORIZATION

By signing this form, you authorize East River Federal Credit Union to obtain credit report(s) in connection with the application you have submitted for any account that you may open including: membership share, share, share certificate, IRA, share draft, or other asset accounts, or opening a credit account or other extensions of credit. If you request, the credit union will tell you the name and address of any credit bureau from which it received a credit report on you.

SIGNATURE VERIFICATION & AUTHORIZATION

I certify that the information provided above is my true and correct identity information.

X

Signature

Date

FOR CREDIT UNION USE ONLY

DOCUMENTARY VERIFICATION

Individuals: (One of the following forms is required)

- Driver's License No: _____ State: _____ Issue Date: _____ Exp. Date: _____
- Student ID No: _____ School: _____
- Passport No: _____ Date: _____ Country: _____ Exp. Date: _____
- Employee ID No: _____ Employer: _____
- Other Document No: _____ Describe Document: _____
Issuing Authority: _____ Issue Date: _____ Exp. Date: _____

Businesses and Other Organizations: (One of the following forms is required)

- Certified Articles of Incorporation Dated: _____ State: _____
- Partnership Agreement Dated: _____ Names of Partners: _____
- Business License No: _____ Date: _____ Issuing Authority: _____ Exp. Date: _____
- Trust Instrument Dated: _____ Name of Grantor(s): _____
- Other documents showing existence of entity (describe): _____
- Financial Statement of Business (describe business): _____

NON-DOCUMENTARY VERIFICATION

- Third Party Verification (credit bureaus, public data bases) Source: _____
- Obtained References from Other Financial Institutions Name: _____
- Contacted Member by: Phone Mail E-Mail
- Other Sources: _____

DISCREPANCY DOCUMENTATION

State any discrepancy in the identity information provided above discovered through the identity verification process and the resolution of the discrepancy.
(Please attach a chronicle if necessary.)

STAFF COMPLETION DOCUMENTATION

Verification Completion Date: _____ By: _____

Government List(s): Checked. OFAC Other: _____

CREDIT UNION TIPS

- 1) Members seeking to open a new account must have their identity verified. An account is a formal banking or business relationship established to provide services, dealings or financial transactions.
Examples of products or services that constitute an account are as follows:
 - ◆ Opening share, saving, certificate, IRA, or their asset accounts
 - ◆ Opening a credit account or other extensions of credit
 - ◆ Safety Deposit boxes or other safekeeping servicesAn account does **NOT** include:
 - ◆ Check cashing
 - ◆ Wire transfer
 - ◆ Check or money order sales
- 2) If a member does not have a residential or business street address collect the APO (Army Post Office) or FPO (Fleet Post Office) or street address of next of kin or other contact.
- 3) If a foreign business does not have a TIN, you must obtain an alternative government issued document certifying the existence of the business or enterprise.
- 4) If a member does not have a TIN, but has applied for a TIN, you may open the account by confirming the application was filed and the member gets the TIN within a reasonable time after the account is opened.