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ACCOUNT OPENING REQUEST

Important Information About Opening a New Account: To help our 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 when opening a new account. What does this mean for you? When you open a new account, we will ask your name, address, date of birth, and other information that will help us to identify you. We may also ask to see some type of positive identification.

Name _____ Email Address _____ Member No. _____

Date of Birth _____ SSN _____ Best # to Reach You _____ Mother's Maiden Name _____

Current Address _____ City _____ State _____ Zip _____

ID Type _____ ID Number _____ Exp. Date _____ Eligibility _____

Joint Account Owner (Optional)

Name _____ Email Address _____ Member No. _____

Date of Birth _____ SSN _____ Best # to Reach You _____ Mother's Maiden Name _____

Current Address _____ City _____ State _____ Zip _____

ID Type _____ ID Number _____ Exp. Date _____ Eligibility _____

Election of Account Type and Services: Check All that Apply

- Checking
 Direct Deposit
 Online Banking
 Overdraft Protection from Savings
 Savings
 Debit Card
 Bill Pay
 e-Statements

TIN CERTIFICATION AND BACKUP WITHHOLDING INFORMATION

Under penalties of perjury, I certify that: (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued), 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 longer subject to backup withholding, and (3) I am a U.S. citizen or other U.S. person. For federal tax purposes you are considered a U.S. person if you are: and individual who is a U.S. citizen or U.S. resident alien. **Certification Instructions:** Cross out item 2 above if you have been 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.

AUTHORIZATION

By signing or otherwise authenticating, I/we agree to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Disclosure, Privacy Disclosure, Fee Schedule, Funds Availability Policy Disclosure, if applicable, and to any amendment the Credit Union makes from time to time which are incorporated herein. **Credit Report Authorization:** You authorize the Credit Union to check your account, credit and employment history, and obtain reports from third parties, including credit reporting agencies, to verify your eligibility for the accounts and services you request and for other accounts, products or services we may offer you or for which you may qualify, including any lending products or services. 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. The Credit Union will rely on information you have provided. By signing below you affirm that all information on this document or that has been provided elsewhere is correct.

I/We acknowledge receipt of the agreements 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 Fund Transfers Agreement and Disclosure. All of the terms, conditions, form of account ownership, account selection and other information indicated on this document applies to all of the accounts listed unless the credit union is notified in writing of a change. I/We agree that any updates identified herein amend the previously signed Member Services Request(s), and are subject to the terms and conditions of the applicable disclosures noted above.

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 _____
 Signature Date

X _____
 Joint Account Owner Signature Date

FOR CREDIT UNION USE ONLY

Date of Membership _____ Opened/Approved By _____ Verification Completion Date _____ Verification By _____
 Government Lists Checked Treasury CIP List OFAC Other _____ List Verification Completion Date _____ Verification By _____