



Add Joint Owner Change Form

Member Name: _____
Account Number: _____

Shares for which the new joint owner is authorized:

Current government-issued photo identification and social security card of new joint owner is required.

Accounts owned by two (2) or more people are held as **JOINT TENANCY WITH RIGHTS OF SURVIVORSHIP**, unless otherwise indicated on a form that has been accepted by SAFE Federal Credit Union. Joint account owners have equal rights to funds where right of withdrawal is authorized, upon the death of any account holder. All account owners agree that SAFE Federal Credit Union may charge against and deduct from account(s) any debt owed to the Credit Union now or in the future, by any of you having the right of withdrawal, to the extent of such person's or legal entity's right to withdraw.

Primary Member Authorization (required)

As the primary member of this account, or authorized legal representative of said primary member, I authorize the submission of the individual indicated below to establish account ownership to the shares designated on the account stated above. All account holder(s) agree to and authorize to this change. I understand that if approved, I will assume full responsibility for all charges, purchases and cash advances made by this individual on the account.

Primary Member Signature

Date

Existing Joint Account Owner(s) Authorization (required signatures of all existing joint owners on the account)

The joint owners below authorize the individual indicated below to establish joint account ownership to the share(s) designated on the account stated above. All joint account holder(s) agree to and authorize this change. I / we understand that if approved, I / we will assume full responsibility for all charges, purchases and cash advances made by the individual added to the account. I / We further agree that the changes in this Add Joint Owner Change Form amend the previously signed Membership Application and any previous request to change joint ownership are subject to the terms and conditions of the Membership, Account and Account Services Agreement, Rate Schedule and Truth-in-Savings Disclosures, Electronic Funds Transfer Agreement and Disclosures and Privacy Notice, if applicable, and to any amendments SAFE Federal Credit Union makes from time to time, which are incorporated herein.

Joint Owner Name (Print)

Date

Joint Owner (Signature)

Joint Owner Name (Print)

Date

Joint Owner (Signature)

Joint Owner Name (Print)

Date

Joint Owner (Signature)

New Joint Owner Information and Authorization

New Joint Owner Name: _____ Address: _____
SSN / TIN: _____ (no PO Box) _____
Date of Birth: _____
Phone Number: _____ Email Address: _____
Identification Number: _____ Dated Issued: _____
State of Issuance: _____ Type: Select one

By signing below, as a joint account owner I agree to the Bylaws, as may be amended, of SAFE Federal Credit Union, and certify that I am within the field of membership of the Credit Union. I also acknowledge that the Primary Member has received a copy of the Membership, Account and Account Services Agreement, Rate Schedule and Truth-in-Savings Disclosures, Electronic Funds Transfer Agreement and Disclosures and Privacy Notice, and all other disclosures required by law to be provided at account opening ("Disclosures"). I agree to be bound by the terms and conditions stated within the Disclosures and may request a copy at any time for my records.

In considering me for other financial services you may request and use reports from my employer, creditor(s) or outside reporting agencies or services. At my request, you will tell me whether you asked for a report from a credit reporting service, and if so, the name and address of the agency or agencies. You may also report information concerning account(s) and credit to others as applicable through privacy laws.

I acknowledge that SAFE Federal Credit Union may obtain credit bureau reports as a requirement for my access to this account and/or to specified share(s) designated by the Primary Member. SAFE Federal Credit Union may refuse access to account share(s) if information on reports does not meet its guidelines and/or if data cannot be verified.

New Joint Owner Signature

Date

If any portion of this form is signed outside of SAFE Federal Credit Union, it must sign in the presence of a notary.

Notary

State of _____
County of _____

The following individuals _____, _____,
_____ appeared and subscribed and sworn before me this _____ day of
_____, 20 _____.

Notary Signature

Commission expires: _____

FOR INTERNAL USE ONLY

Processed By (Teller Number): _____ Date Received: _____ Reviewed By (Teller Number): _____