



**Union
Building
Trades**

Federal Credit Union

P.O. Box 6270, Parsippany, NJ 07054

Membership & Account

Application

ACCOUNTS *(Please choose any that apply)*

- Share Savings Account (required for membership)- include initial deposit of at least \$5.00
- Share Draft (Checking) Account – include initial deposit of \$50.00
- VISA® Debit Card (PIN will be mailed to you)
- Statement Delivery (choose one):
 - E-Statement (Free) (sign up via Virtual Branch)
 - Paper Statement (\$1.00 each) (default Option)
- Access 24 (audio response phone system) (automatic enrollment)
- Virtual Branch – Home Banking (must sign up online at www.ubtfcu.org) (mobile banking available)

Please send a copy of 2 forms of identification, one from each category:

Primary- Current photo driver's license with current address, valid photo state/government issued ID with current address, or passport (secondary ID must have current address.)

Secondary- Social Security card, utility bill issued in the past 90 days that shows current address, student ID, or Union card.

Please complete application in blue or black ink.

PRIMARY OWNER – Two Forms of ID Required

SOCIAL SECURITY # _____

Name Mr. Mrs. Ms. _____

Address _____ City _____

State/Zip Code _____ Driver's License No. _____

Date of Birth _____ Home Phone _____

Cell # _____ Email Address _____

Local Union # _____ Work Phone _____

Employer Address _____ Employer Fax _____

Eligibility: Employee Relative of Current Member Relationship _____

Relative's Name _____

Mother's Maiden Name _____

JOINT MEMBER – Two Forms of ID Required

SOCIAL SECURITY # _____

Name Mr. Mrs. Ms. _____

Address _____ City _____

State/Zip Code _____ Driver's License No. _____

Date of Birth _____ Home Phone _____

Cell # _____ Email Address _____

Relationship to Primary Owner _____

BENEFICIARY (IMPORTANT – PLEASE COMPLETE)

Last Name _____ First Name _____ M.I. _____
Street _____ City _____ State _____ Zip _____
Home Phone # _____ SSN _____
Relationship to Primary Member _____ Date of Birth _____

MINOR INFORMATION (only if opening a Trust account for a minor)

Account Designation: _____ Date of Birth _____
UTTMA/UGMA (as custodian for _____ (minor) under the
Uniform Transfers/Gift to Minors Act) Minor's SSN _____
Custodianship terminated when minor attains the age of _____ 18 _____ 21

PLEASE SEND A COPY OF CHILD'S BIRTH CERTIFICATE AND SOCIAL SECURITY CARD.

MEMBER MUST READ AND SIGN WHERE INDICATED

(Instruction to Signer: If you have been notified by the IRS that you are subject to backup withholding due to payee underreporting and you have not received a notice from the IRS that the backup withholding has terminated, you must strike out the language in clause 2 or the certification you sign below.)

CERTIFICATION AS TO TAXPAYER IDENTIFICATION NUMBER AND BACKUP WITHHOLDING

Under the penalties of perjury, I certify (1) that the number shown on this form is my correct taxpayer identification number and (2) that I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or withholding, and (3) I am a U.S. person (including a U.S. resident alien). By signing this card, you authorize the Credit Union to obtain credit reports in connection with this application for membership, services and/or credit, and for update, renewal or extension of the credit received, if applicable. If you request, the Credit Union will tell you the name and address of any bureau from which it received a credit report on you.

STATUTORY LIEN.

If you are in default on any financial obligation to us, federal law gives us the right to apply the balance of share and dividends in your account(s) at the time of default to satisfy the obligation. Once you are in default, we may exercise the right without further notice to you. By signing this application to us, federal law gives us the right to apply the balance of share and dividends in your account(s) at the time of default to satisfy the obligation. Once you are in default, we may exercise the right without further notice to you. By signing this application we agree to all terms and conditions of the Credit Union and any amendment the Credit union makes from time to time which are incorporated herein.

MEMBERSHIP AGREEMENT

By signing on the signature line below, you agree to all terms and conditions outlined in THIS BOOKLET and FEE SCHEDULE which will be sent to you.

X _____ Date _____
Primary Owner (Signature)
X _____ Date _____
Joint Owner (Signature)

YES, I want to discover all that Union Building Trades FCU has to offer. Please send me information on the following services:

- Checking Account
- Home Equity Loan
- VISA® Debit Card
- Student Services
- VISA® Credit Card
- Savings & Certificates
- Free Bill Pay service
- Home Equity Line of Credit
- Money Market Account
- Other Loans (please specify)
- First Mortgage
- IRAs
- Free Home Banking Virtual Branch
- Mobile Banking Application (Must have Virtual Branch)

