

Add Joint Owner Form



Form Instructions:

- 1 — Complete all applicable fields
- 2 — Print completed form
- 3 — Sign and date the Signature section
- 4 — Include a copy of a non-expired government or state-issued ID

- 5 — Print and mail the completed form to:
 Delta Community Credit Union
 ATTN: Deposit Services
 P.O. Box 20541, Atlanta, GA 30320-2541
 or fax to 404-677-4802

Primary Member Information

 Name (First, MI, Last) Account Number

Joint Owner Information (List all existing and new joint owners.)

 Joint 1 Name (First, MI, Last) Social Security Number Date of Birth (MM/DD/YYYY)

 Street Address (No P.O. Boxes) City State Zip

 Home Phone Work Phone Cell Phone

 Email Address

ID Type: Driver's License State Issued ID US Passport US Military ID Green Card

 ID Number State of Issue/Military Branch Issue Date Expiration Date

 Employer Date of Hire Occupation

- Accounts**
- Savings Account Share ID: _____
 - Additional Savings Account Share ID: _____
 - Free Checking Account Share ID: _____
 - SpendSafe Checking™ Share ID: _____
 - Interest Checking Share ID: _____
 - Money Market Account Share ID: _____
 - Certificate of Deposit (CD) Share ID: _____

Cards *ATM/Visa® Debit Card **Card Design** Delta Community Logo Airplane MMA ATM



Joint 2 Name (First, MI, Last) Social Security Number Date of Birth (MM/DD/YYYY)

Street Address (No P.O. Boxes) City State Zip

Home Phone Work Phone Cell Phone

Email Address

ID Type: Driver's License State Issued ID US Passport US Military ID Green Card

ID Number State of Issue/Military Branch Issue Date Expiration Date

Employer Date of Hire Occupation

Accounts

Savings Account	Share ID: _____
Additional Savings Account	Share ID: _____
Free Checking Account	Share ID: _____
SpendSafe Checking™	Share ID: _____
Interest Checking	Share ID: _____
Money Market Account	Share ID: _____
Certificate of Deposit (CD)	Share ID: _____

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Terms and Conditions

1. You promise that everything you have stated in this application is correct. You authorize Delta Community Credit Union ("Credit Union") to verify your employment and to obtain credit reports and copies of state issued identifications in connection with your request. You understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information on applications made to federal credit unions and state chartered credit unions insured by the National Credit Union Administration. If there are any important changes, you will notify us in writing immediately. You also agree to notify us of any change in your name, address or employment within a reasonable time thereafter.

2. Upon submission of this form signed by all account owners, the ownership of the existing accounts will be modified as described herein. (This form cannot be used to remove an owner from any account) Any payable on death beneficiaries previously named will continue to apply to the account(s).

TIN Certification and Backup Withholding Information

By signing below, 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 to me, 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. citizen or other U.S. person (defined in the instructions).

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. The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Signature of Applicant/Member

Date

Signature of Joint Owner 1

Date

Signature of Joint Owner 2

Date