



# PROSPECTORS FEDERAL CREDIT UNION

1310 South Valley Vista Drive • Diamond Bar, California 91765  
Main (909) 396-9688 • Fax (909) 396-6226 • [www.prospectorsfcu.org](http://www.prospectorsfcu.org)



## ADDITIONAL SERVICES REQUEST FORM

Member Name (Print) \_\_\_\_\_ Account No. \_\_\_\_\_

I hereby make application for the account(s) indicated below and agree that the account(s) is/are subject to the terms of the Membership Invitation. I understand and agree that the account(s) indicated below are owned by any joint owner(s) set forth on the Membership Invitation.

- SHARE DRAFT CHECKING . . . . .Transfer from:  Savings  Check Enclosed . . . . . \$ \_\_\_\_\_  
(\$2500 minimum to open)  Direct Deposit - monthly service fee waived with Direct Deposit  
*Complete the Overdraft Options section below*
  - DEBIT CARD or  ATM CARD
  - CHRISTMAS CLUB (No minimum to open) . . . . .Transfer from:  Savings  Check Enclosed . . . . . \$ \_\_\_\_\_
  - MONEY MARKET ACCOUNT . . . . .Transfer from:  Savings  Check Enclosed . . . . . \$ \_\_\_\_\_  
(\$2,500 minimum to open)
  - CERTIFICATES (\$1,000 minimum to open) Term \_\_\_\_\_ . . . . .Transfer from:  Savings  Check Enclosed . . . . . \$ \_\_\_\_\_  
(term subject to board policy)
- TOTAL ENCLOSED** . . . . . \$ \_\_\_\_\_

### OVERDRAFT OPTIONS

Overdrafts can be covered in two different ways or combinations thereof. They are: 1) A transfer from my savings account, with not more than three transfers in any calendar month, or 2) An advance from my Line of Credit, upon approval of credit and subject to terms and conditions of that account, up to my credit limit. If this option is selected the employment / income section below must be completed (check only one box) INCOME VERIFICATION REQUIRED

- Savings only  Savings, then Line of Credit  Line of Credit only  Line of Credit, then Savings  No Overdraft

ATTACH INCOME VERIFICATION HERE

Member Employer \_\_\_\_\_ Date employed \_\_\_\_\_ Monthly wages, before taxes \$ \_\_\_\_\_

Member Social Security No. \_\_\_\_\_  Monthly rent or  Mortgage payment Total of all other loan payments \$ \_\_\_\_\_

Joint Owner Name (if applicable) \_\_\_\_\_ Joint Owner Employer \_\_\_\_\_ Date employed \_\_\_\_\_ Monthly wages, before taxes \$ \_\_\_\_\_

Joint Owner Social Security No. \_\_\_\_\_  Monthly rent or  Mortgage payment Total of all other loan payments \$ \_\_\_\_\_

### JOINT OWNER INFORMATION

#### 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 for Me: When I open an account, you will ask for my name, address, date of birth, and other information that will allow you to identify me. You may also ask to see my driver's license or other identifying documents.

Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Member Signature **X** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_

( ) \_\_\_\_\_  
Day Time Phone

( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Business Phone Pager No.

E-mail \_\_\_\_\_ Driver's License No. \_\_\_\_\_ 241738-202E

Joint Owner (please print) \_\_\_\_\_

Social Security No. \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Home Phone Business Phone

( ) \_\_\_\_\_  
Pager No. E-mail \_\_\_\_\_

Driver's License No. \_\_\_\_\_ Relationship to Primary Owner \_\_\_\_\_

Joint Owner (please print) \_\_\_\_\_

Social Security No. \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Home Phone Business Phone

( ) \_\_\_\_\_  
Pager No. E-mail \_\_\_\_\_

Driver's License No. \_\_\_\_\_ Relationship to Primary Owner \_\_\_\_\_

**X** \_\_\_\_\_ Date \_\_\_\_\_  
Joint Owner Signature

**X** \_\_\_\_\_ Date \_\_\_\_\_  
Joint Owner Signature

**X** \_\_\_\_\_ Date \_\_\_\_\_  
Authorized by Primary Owner

**IMPORTANT: IF THIS IS A JOINT ACCOUNT, PLEASE COMPLETE THE JOINT OWNER INFORMATION.**  
FOR CREDIT UNION USE ONLY

VERIFICATION OF ID:

Documentary Method Used (other than Driver's License)\*  
Type of Document: Sdf ID No.: \_\_\_\_\_  
Place of Issuance: \_\_\_\_\_ Date of Issuance: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Non-Documentary Method Used: \_\_\_\_\_ Results: \_\_\_\_\_

Description of Resolution of Any Substantive Discrepancy: \_\_\_\_\_

ID Verified By (Print Name): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: **X** \_\_\_\_\_ Date: \_\_\_\_\_

Application Approved By (Print Name): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: **X** \_\_\_\_\_ Date: \_\_\_\_\_