

Apple Federal Credit Union New Account & Loan Application



APPLE FEDERAL CREDIT UNION
P.O. Box 1200 | Fairfax, VA 22038-1200
AppleFCU.org | 703-788-4800

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. When you open a new account, we will ask your name, address, date of birth, and other information that will help us identify you. We may also ask to see your driver's license or other identifying documents.

ELIGIBILITY FOR MEMBERSHIP

☐ Employer ☐ Community ☐ Student ☐ Alumni
☐ Household/Family Member Name _____
Relationship _____ Member Number _____

ACCOUNT TYPE

☐ Individual

☐ Joint (with survivorship)

Member No. _____

☐ Joint (without survivorship)

MEMBER INFORMATION

Name (Last, First, MI)			
Date of Birth (MM/DD/YYYY)			
Social Security Number/TIN			
Street Address			
City, State, Zip			
Home Phone Number ()	Work Phone Number ()		
Mobile Phone Number ()	Email Address		
Employer	Occupation	Start Date	
Employer's Address		City, State, Zip	
Driver's License/State ID Number	ID Issuing State	ID Issuing Date (MM/DD/YYYY)	ID Expiration Date (MM/DD/YYYY)

JOINT OWNER

Name (Last, First, MI)			
Date of Birth (MM/DD/YYYY)		Social Security Number/TIN	
Street Address		City, State, Zip	
Home Phone Number ()	Work Phone Number ()		
Mobile Phone Number ()	Email Address		
Employer	Occupation	Start Date	
Employer's Address		City, State, Zip	
Driver's License/State ID Number	ID Issuing State	ID Issuing Date (MM/DD/YYYY)	ID Expiration Date (MM/DD/YYYY)

U.S. PATRIOT ACT CONSUMER INFORMATION - APPLE FCU MEMBER

Length of time at current address: _____. If less than two years, please provide your prior address below:

Street Address

City, State, Zip

Country

Place of Birth (City & State or Country)

Are you a U.S. Citizen?

☐ Yes

☐ No

Do you have a passport?

☐ Yes

☐ No

Are you a Permanent Resident?

☐ Yes

☐ No

Are you employed by a Marijuana-related business?

☐ Yes

☐ No

Will you process ACH (electronic) transactions? ☐ Yes ☐ No

Anticipated number and amount of ACH transactions per month: Number

Amount \$

Will you use our Wire Services? ☐ Yes ☐ No

Anticipated number and amount of wires per month: Number

Amount \$

DEPOSIT PRODUCTS & SERVICES

☒ Savings ☐ eXtras Student Savings ☐ eXtras Student Checking

☐ FREE A+ Checking ☐ Advantage Checking ☐ Investors Checking ☐ Visa® Debit Card

☒ FREE eSTATEMENTS AGREEMENT

I elect to obtain my Apple FCU account information online only via eStatements. I understand that Apple FCU will mail me a paper account statement at any time upon request (a fee may apply). Apple FCU will not disclose or sell any personal information to third parties, excluding credit union affiliates, concerning my accounts.

Email Address _____

☐ I do NOT wish to receive eStatements. I will instead receive paper statements in the mail.

TEXT MESSAGE COMMUNICATIONS OPT-IN

☐ I authorize Apple FCU to communicate with me via text, SMS and cell phone for any reason including collections of past due accounts. I also consent to receive auto-dialed calls or SMS from Apple FCU. I understand that consent is not a condition of purchase.

☐ I do NOT wish to receive auto-dialed calls to my cell phone or text message communications.

Request for more information on: ☐ Mortgage ☐ Equity ☐ Mortgage Refinance
For these loans, you DO NOT need fill out the application below.

CONSUMER LOAN APPLICATION

Individual Credit: Complete the Application section about yourself. Complete other information about your spouse if: 1) you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI); OR 2) your spouse will use the account; OR 3) you are relying on your spouse's income for repayment.

Credit Card Account: By checking the box for a credit card account, you are requesting a credit card at this time. There are costs associated with the use of the card. To obtain information about these costs, visit AppleFCU.org/Visa.

REQUESTED LOAN: ☐ Auto ☐ Credit Card ☐ Personal

APPLICANT INFORMATION

Applicant's Name (Last, First, MI)			Credit Limit Requested
			\$
Years at Current Address	Date at Current Address	Housing Status	Monthly Mortgage/Rent
		<input type="checkbox"/> Own <input type="checkbox"/> Rent	\$
Mother's Maiden Name	No. of Dependents	Emergency Contact Name	Emergency Contact Phone Number
			()
Previous Address		City, State, Zip	
Previous Employer		Previous Employer's Address	How Long?
Gross Monthly Salary	Other Monthly Income*	Source of Other Income*	
\$	\$		

ACKNOWLEDGEMENTS

If loan is requested and provided, you acknowledge receipt of and agree to the terms of the applicable disclosures provided at loan closing.

CREDIT REPORT AUTHORIZATION

By signing below you authorize the Credit Union to check your employment and credit history and to obtain credit reports in connection with any request for membership or credit, including any update, increase, renewal, extension or collection of credit you receive. 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.

FOR CREDIT CARD REQUESTS

(1) You promise that everything you have stated in this application is correct to the best of your knowledge. If there are any important changes you will notify us in writing immediately. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. 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. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions. (2) You understand that the use of your card will constitute acknowledgment of receipt and agreement to the terms of the credit card agreement and disclosures. You grant us a security interest in all individual and joint share and/or deposit accounts you have with us now and in the future to secure your credit card account. When you are in default, you authorize us to apply the balance in these accounts to any amounts due. Shares and deposits in an Individual Retirement Account, and any other account that would lose special tax treatment under state or federal law if given as security, are not subject to the security interest you have given in your shares and deposits.

Applicant's Signature	Date
X	

STATE LAW NOTICES

Ohio Residents Only: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

Wisconsin Resident Only: (1) No provision of any marital property agreement, unilateral statement under \$766.59, or court decree under \$766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened. (2) Please sign if you are not applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.

X	
Signature for Wisconsin Resident Only	Date

By signing below, I/we hereby make application for membership in Apple Federal Credit Union and agree to the terms and conditions of the Membership and Account Agreement, Truth in Savings, Rate and Fee Schedule, Funds Availability Policy Disclosure, if applicable, and to any amendment the Credit Union makes from time to time which are incorporated herein. I/We acknowledge receipt of a copy 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 Funds Transfer Agreement.

Apple Federal Credit Union is hereby authorized to recognize any one of the signatures subscribed hereto in the payment of funds or the transaction of any business for this account. The joint owners of this account hereby agree with each other and with said credit union that all sums now paid in on shares, or heretofore or hereafter paid on shares, by any or all of said joint owners to their credit as such joint owner, with all accumulations thereon, are and shall be owned by them jointly, and be subject to the withdrawal or receipt of any one of them and payment to any one of them or the survivor(s) or the estate(s) of the deceased joint owner(s)—according to the type of joint share account selected, as evidenced by the signatures below—shall be valid and discharge said credit union from any liability for such payment.

A joint owner who is an Apple FCU member may pledge all or any part of the shares in this account as collateral security for a loan or loans and the credit union is authorized to apply shares at any time against any indebtedness owing to it by any of the joint owners. If joint ownership is desired, all joint owners must complete the information in the space provided. NOTE: All joint owners must agree to the same type of joint ownership.

This account shall be governed by applicable Virginia Laws, Federal Laws, Rules & Regulations, and the By-laws of the Credit Union and any amendments thereto. Statutory Lien: If you are in default on a financial obligation to us, federal law gives us the right to apply the balance of shares and dividends in your account(s) at the time of default to satisfy that obligation. Once you are in default, we may exercise the right without further notice to you. If at any time you cause Apple Federal Credit Union a loss due to breaking an agreement or fraud (i.e., loan default, forgery, etc.) your service usage will be limited. Further, by submitting this application you consent to allow the Credit Union to obtain your consumer reports and verify your employment history and other personal information in connection with this application or for related financial services.

I hereby certify that this information is true and correct under penalty of perjury. Under penalties of perjury, I certify that the Social Security Number I have listed is my correct number and I am not subject to backup withholding. The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

TIN CERTIFICATION AND BACKUP WITHHOLDING INFORMATION

Under penalties of perjury and by signing below, 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),
- (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. person (including a 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.

Account Owner Signature	Date
X	
Joint Owner Signature	Date
X	

	Deposit Amount	Staff ID
FOR OFFICE USE ONLY		
Member/Account Notes:		