



ACCOUNT APPLICATION & AGREEMENT

NE PA COMMUNITY FEDERAL CREDIT UNION
935 Clay Avenue
STROUDSBURG, PA 18360
(570) 421-5585

CREDIT UNION USE ONLY ACCOUNT NUMBER

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

Please check this box if you are currently a member and adding a Share Draft/Checking Account and/or Visa Check Card. If so, each person who is entitled to use the new Share Draft/Checking Account need only sign this Application and correct any applicable information. If applying for a Visa Check Card, additional documentation is required.

SECTION I. MEMBER INFORMATION:

Name:	_____	Social Security No. (SSN):	_____
Birth Date:	_____	Identification No.:	_____
Type of Identification:	_____	<u>Physical Address:</u>	_____
<u>Mailing Address:</u>	_____	Address	_____
Address	_____	City	_____
City	_____	State	_____
State	_____	Zip	_____
Zip	_____	Employer's Name:	_____
Employer's Name:	_____	Home Telephone No.:	_____
Position/Title:	_____	Work Telephone No.:	_____
Employer's Address:	_____	Place of Birth:	_____
Place of Birth:	_____	Mother's Maiden Name:	_____
Membership Eligibility:	COMMUNITY	E-Mail Address:	_____

SECTION II. JOINT APPLICANT (Joint Owner #1):

Name:	_____	Social Security No. (SSN):	_____
Birth Date:	_____	Identification No.:	_____
Type of Identification:	_____	<u>Physical Address:</u>	_____
<u>Mailing Address:</u>	_____	Address	_____
Address	_____	City	_____
City	_____	State	_____
State	_____	Zip	_____
Zip	_____	Employer's Name:	_____
Employer's Name:	_____	Home Telephone No.:	_____
Position/Title:	_____	Work Telephone No.:	_____
Employer's Address:	_____	Place of Birth:	_____
Place of Birth:	_____	Mother's Maiden Name:	_____

SECTION III. JOINT APPLICANT (Joint Owner #2):

Name:	_____	Social Security No. (SSN):	_____
Birth Date:	_____	Identification No.:	_____
Type of Identification:	_____	<u>Physical Address:</u>	_____
<u>Mailing Address:</u>	_____	Address	_____
Address	_____	City	_____
City	_____	State	_____
State	_____	Zip	_____
Zip	_____	Employer's Name:	_____
Employer's Name:	_____	Home Telephone No.:	_____
Position/Title:	_____	Work Telephone No.:	_____
Employer's Address:	_____	Place of Birth:	_____
Place of Birth:	_____	Mother's Maiden Name:	_____

SECTION IV. JOINT ACCOUNTS - RIGHT OF SURVIVORSHIP

The NE PA Community Federal Credit Union is hereby authorized to recognize any of the signatures subscribed below 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 in on shares by any or all of said joint owners to their credit as such joint owners with all accumulations thereon, are and shall be owned by them jointly, with right of survivorship and be subject to the withdrawal or receipt of any of them, and payment to any of them or the survivor or survivors shall be valid and discharge said credit union from any liability for such payment. The joint owners also agree to the terms and conditions of the account as established by the credit union from time to time.

Any or all of said joint owners may pledge all or any part of the shares in this account as collateral security to a loan or loans from the credit union.

The right or authority of the credit union under this agreement shall not be changed or terminated by said owners, or any of them except by written notice to said credit union which shall not affect transactions theretofore made.

SECTION V. ACCOUNT TYPES:

Please select the account types you want. If approved, we will open the account(s) as one of the following: (1) in the name of the Member only if section I. is completed; (2) in the name of the Member and the Joint applicant as joint tenants with right of survivorship if both sections I. and II. are completed; or (3) in the name of the Member and the two Joint applicants as joint tenants with right of survivorship if sections I., II., and III. Are completed. **Below, the Member must place their initials next to the Account and/or Service being requested.**

- | | |
|------------------------------------|--|
| _____ Share/Savings Account | _____ NE PA Home Branch/E-Statements |
| _____ Share Draft/Checking Account | _____ DANA Telephone Teller |
| _____ Holiday Club | _____ NE PA Bill Payer (Share Draft Acct required) |
| _____ Vacation Club | _____ Visa Check Card *** |
| _____ Top Performing Share Account | ***Additional Documentation is Required |

SECTION VI. SHARE DRAFT/CHECKING ACCOUNT (IF APPLICABLE)

I/We hereby authorize the NE PA Community Federal Credit Union (the Credit Union) to establish this Share Draft/Checking Account for me/us. The Credit Union is authorized to pay share drafts signed by me (or by any of us) and to charge all such payments against the shares in the Account.

It is further agreed that:

- a. Only share draft blanks and other methods approved by the Credit Union may be used to make withdrawals from this account.
b. The Credit Union is under no obligation to pay a share draft that exceeds the fully paid and collected share balance in this Account.
c. The Credit Union may pay a share draft on whatever day it is presented for payment, notwithstanding the date (or any limitation on the time of payment) appearing on the share draft.
d. When paid, share drafts become the property of the Credit Union and will not be returned either with the periodic statement of this Account or otherwise.
e. Except for negligence, the Credit Union is not liable for any action it takes regarding the payment or nonpayment of a share draft.
f. Any objection respecting any item shown on a periodic statement of this Account is waived unless made in writing to the Credit Union before the end of 60 days after the statement is mailed.
g. This Account is subject to the Credit Union's right to require advance notice of withdrawal, as provided in its bylaws.
h. This Account is also subject to such other terms, conditions, and service charges as the Credit Union may establish from time to time.

SECTION VII. TAX IDENTIFICATION NUMBER CERTIFICATION AND BACKUP WITHHOLDING INFORMATION

BACKUP WITHHOLDING CERTIFICATIONS - By signing below, I certify under penalties of perjury that:

- 1- The number shown on this form is my correct Social Security Number (SSN) or Taxpayer Identification Number (TIN), and
2- I am not subject to backup withholding because: (a) I am exempt from backup withholding (and have written "Exempt" after my SSN/TIN on the SSN blank), 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 informed 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. citizen.

SECTION VIII. AUTHORIZATION

- 1. By signing below, for new members, I hereby make application for membership in the NE PA Community FCU and agree to conform to the bylaws and any amendments thereof, and I acknowledge receipt of a copy of the Membership Account Agreement, Funds Availability Disclosure, Electronic Fund Disclosure, Privacy Statement, and the Truth in Savings Rate and Fee Schedule.
2. You authorize the Credit Union to check your employment and credit history and to obtain credit reports in connection with your request for credit or services.
3. The undersigned certify that information provided on this Application is true and correct.
4. 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 Member Date Signature of Joint Owner #1 Date
Signature of Witness Date Signature of Joint Owner #2 Date

The signatures above must be either witnessed by a credit union employee or notarized if signed outside of the Credit Union office. In the latter situation, a photocopy of a Credit Union approved picture identification is required.

Notarization of Signature (Member)

State of County of
On this the day of 20 before me came
known to me (or satisfactorily proven) to be the person described in and who executed the foregoing instrument and acknowledged that he/she executed the same.

In witness whereof, I hereunto set my hand and official seal.

Notary Public

Notarization of Signature (Joint Owner #1)

State of County of
On this the day of 20 before me came
known to me (or satisfactorily proven) to be the person described in and who executed the foregoing instrument and acknowledged that he/she executed the same.

In witness whereof, I hereunto set my hand and official seal.

Notary Public

Notarization of Signature (Joint Owner #2)

State of County of
On this the day of 20 before me came
known to me (or satisfactorily proven) to be the person described in and who executed the foregoing instrument and acknowledged that he/she executed the same.

In witness whereof, I hereunto set my hand and official seal.

Notary Public



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The following fees may be assessed against your account and the following transaction limitations, if any, apply to your account.

Share Draft Fees

NSF Fee (Overdraft-Check Paid From Same Account Number)	\$15.00
NSF Fee (Overdraft-Check Paid From Another Account Number)*	\$20.00
NSF Fee (Overdraft-Check Returned)	\$25.00
Draft Printing (Fee depends on style of draft ordered, first 150 at no charge)	
Share Draft Photocopy Fee (If Item Has Cleared In Last 6 Months)	\$1.50 per share draft
Share Draft Photocopy Fee (If Item Has Not Cleared In Last 6 Months) - Mailed	\$1.50 per share draft
Share Draft Photocopy Fee (If Item Has Not Cleared In Last 6 Months) - Faxed	\$2.50 per share draft
Stop Payment Fee	\$12.00
Share Draft Manual Posting Fee	\$1.50 per share draft exception

Automated Clearing House (ACH) Fees

NSF Fee (Overdraft-ACH Item Paid From Same Account Number)	\$15.00
NSF Fee (Overdraft-ACH Item Paid From Another Account Number)*	\$20.00
NSF Fee (Overdraft-ACH Item Returned)	\$25.00
ACH Origination Set-Up Fee	\$1.50
ACH Origination Transaction Fee	\$.50 per month
ACH Origination Change/Delete Fee	\$1.50 per change/deletion
Stop Payment Fee	\$12.00

Visa Check Card Fees

ATM Withdrawal Fee - 8 Free Per Month - (NE PA Owned ATMs are Free)	Thereafter, \$1.50 per withdrawal
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NE PA Bill Payer Fees

Monthly Fee - There are NO Monthly Fees if Member has Share Draft Account, Visa Check Card, NE PA Home Branch With E-Statements, and Provides e-mail Address to Credit Union; Otherwise the Monthly Fee would be:

10 or More Bills Paid Per Month	No fee - FREE
6 to 9 Bills Paid Per Month	\$3.00 monthly fee
5 or Fewer Bills Paid Per Month	\$5.00 monthly fee
Merchant Return Fee	\$10.00
Stop Payment Fee	\$12.00
NSF Fee (Overdraft-NE PA Bill Payer Item Paid From Same Account Number)	\$15.00
NSF Fee (Overdraft-NE PA Bill Payer Item Paid From Another Account Number)*	\$20.00
NSF Fee (Overdraft-NE PA Bill Payer Item Returned)	\$25.00

Wire Transfer Fees

Wire Transfer Fee - Domestic Outgoing Wire	\$15.00
Wire Transfer Fee - International Outgoing Wire	\$35.00
QuickCash Fee (Western Union)	Fee depends on type of transaction

Miscellaneous Fees

Membership Fee	\$1.00
Telephone Transaction/Inquiry Fee**	\$1.00 Per Transaction/Inquiry
Certified Check Fee	\$5.00
Credit Union Teller Check Fee	\$1.00
Money Order Fee	\$0.75
Visa Gift Card Fee	\$3.00
American Express Gift Card Fee	\$4.00
Travelers Cheques Fee (Visa Traditional or Cheques for Two)	1% of purchase
Returned Check Fee (Check Returned Unpaid - Funds Available)	\$25.00
Returned Check Fee (Check Returned Unpaid - No Funds Available)	\$25.00 per day
Cashed Check Fee (If aggregate share and loan balances are less than \$250.00)	\$3.00 per check
Garnishments	\$10.00 (plus legal fees)
Executions	\$10.00 (plus legal fees)
Levies	\$10.00 (plus legal fees)
Foreign Currency Fee (Travelex)	Fee depends on type of transaction
Photocopy Fee	\$.10 per sheet
Fax Fee	\$1.50 per sheet
Missing Address Fee	\$2.50 per month
Address Location Fee	\$5.00
Dormant Account Fee	\$5.00 per year
Closed Account Fee (If Closed Within 90 Days of Account Opening)	\$15.00
Account Activity Printout	\$1.00
Account Research	\$10.00 per hour
Account Balancing Assistance	\$10.00 per hour

*The credit union must receive written authorization from the member, in advance, for this service.

**This fee applies to all transactions/inquiries that the member can complete via DANA and/or NE PA Home Branch, but they choose to use a credit union staff member via the telephone to perform the request.

Effective Date: August 1, 2010