



PERSONAL INFORMATION CHANGES AND REQUESTS CHECKLIST

HELP US PROCESS YOUR PERSONAL INFORMATION CHANGES AND REQUESTS FASTER BY PROVIDING A FEW THINGS TO GET STARTED:

- Print and complete a Personal Information Changes and Requests form located on becu.org.
- Gather the required documents and information (see below).
- Return the completed form and required documents and information by one of the following:
 - In person to any BECU location
 - Fax to **206.805.5612**
 - Mail to: **BECU**
Attn: Account Servicing
PO Box 97050
Seattle, WA 98124

(Note: If returning form by fax or mail, please provide a photocopy of the required documents including photocopies of identification from all required signers.)

FOR MEMBER INFORMATION UPDATES, WE WILL NEED:

- Sections 1 and 7 completed on Personal Information Changes and Requests form.

FOR NAME CHANGES, WE WILL NEED:

- Valid picture ID with new name
- Picture ID with former name
- Social Security card, TIN/ITIN letter, or court-ordered documents
- Sections 1, 2, and 7 completed on Personal Information Changes and Requests form

FOR ADDRESS CHANGES, PLEASE PROVIDE:

- New address/addresses. BECU must have a physical address on file. You may provide a separate mailing address in addition to the physical address.
- Sections 1, 3, and 7 completed on Personal Information Changes and Requests form

FOR CHECK ORDERS, WE WILL NEED:

- Sections 1, 4, & 7 completed on Personal Information Changes and Requests form

Here's helpful information for ordering checks:

- The information requested must match the account information for the account listed.
- Check prices are set by Deluxe and can change without notice. Visit deluxe.com/checks to view designs. Contact us to confirm accurate check prices because they may vary.
- Please include payment if you're returning the form by fax or mail and a request for checks is included.
- If no design is selected, you will receive the BECU Exclusive check design. Additional fees apply.

For Money Market accounts, Exclusive Money Market design will be issued at no charge.

FOR ATM/DEBIT CARD REQUESTS, WE WILL NEED:

- Account numbers for the accounts requesting ATM/Debit card(s)
- Name that should appear on the card
- Sections 1, 5, and 7 completed on Personal Information Changes and Requests form

Here's helpful information about ATM / Debit Card requests:

- Additional or spare ATM/debit cards are not permitted. Only one card per account, per member.

FOR ADDING OR REMOVING A CODE WORD, WE WILL NEED:

- Sections 1, 6, and 7 completed on Personal Information Changes and Requests form

WHAT'S NEXT?

Thank you for providing the requested information and documentation. Once we have received your request, a representative may contact you to review the information provided. We may need additional information to complete your request.

If you have any questions, please contact a BECU representative at **800.233.2328**.

PERSONAL INFORMATION CHANGES AND REQUESTS



Thank you for choosing BECU for your financial service needs. You can use this form to request a change to your existing BECU account or to request checks or a debit/ATM card. If you have any questions, please contact a BECU representative at **800.233.2328**.

- | | |
|---|--|
| <input type="checkbox"/> Change member information (Complete sections 1 and 7.) | <input type="checkbox"/> Request checks (Complete sections 1, 4, and 7.) |
| <input type="checkbox"/> Change name (Complete sections 1, 2, and 7.) | <input type="checkbox"/> Request ATM / debit card (Complete sections 1, 5, and 7.) |
| <input type="checkbox"/> Change address (Complete sections 1, 3, and 7.) | <input type="checkbox"/> Add, remove, or change code word (Complete sections 1, 6, and 7.) |

1. Member Information				
NAME (as it appears currently on your account)				BECU USE ONLY Person #
SOCIAL SECURITY NUMBER (SSN) / TAXPAYER ID NUMBER (TIN)				
HOME PHONE	WORK PHONE	MOBILE PHONE	DATE OF BIRTH	MOTHER'S MAIDEN NAME
VALID PICTURE ID NUMBER	ID TYPE	ISSUE DATE	EXPIR. DATE	STATE & COUNTRY ISSUED
EMPLOYMENT <input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Never Employed			EMAIL ADDRESS	
OCCUPATION / PREVIOUS OCCUPATION (if retired or unemployed)			EMPLOYER / PREVIOUS EMPLOYER (if retired or unemployed)	

2. Change Name				
FORMER NAME		NEW NAME		
CURRENT VALID PICTURE ID NUMBER	ID TYPE	ISSUE DATE	EXPIR. DATE	STATE & COUNTRY ISSUED
BECU Use Only	<input type="checkbox"/> Valid picture ID with new name <input type="checkbox"/> VERID or picture ID with former name <input type="checkbox"/> Social Security card, TIN/ITIN letter, or court ordered documents			

3. Change Address				
NEW STREET ADDRESS (required)	CITY	STATE / PROVINCE	ZIP / POSTAL CODE	COUNTRY
NEW MAILING ADDRESS (if different than above)	CITY	STATE / PROVINCE	ZIP / POSTAL CODE	COUNTRY

4. Request Checks
ACCOUNT NUMBER
Indicate information to print on checks:
<input type="checkbox"/> My name <input type="checkbox"/> Joint account holder (1) <input type="checkbox"/> Joint account holder (2) <input type="checkbox"/> Address <input type="checkbox"/> Home phone <input type="checkbox"/> Mobile phone
Check design: <input type="checkbox"/> BECU Exclusive design <input type="checkbox"/> Other design: _____

5. Request ATM / Debit Card (Note: Only one active card per person per account.)	
Issue additional ATM/Debit card(s) for existing account number(s):	Whose name should appear on the card?
Checking: _____	<input type="checkbox"/> Primary: _____
Savings: _____	<input type="checkbox"/> Joint account holder: _____

6. Code Word

Add Remove Change

If adding or changing, indicate code word you want to use:

7. Agreements and Signatures

(1) You have received, read, understood and agree to all of the terms and conditions contained in the Boeing Employees' Credit Union Account Agreements, BECU's Privacy Notice, Regulation D Explanation, and BECU's Consumer Account Disclosure, all as amended to date and all of which you will retain for your records; (2) Issuance of each ATM and/or Debit Card or other access device is specifically requested; (3) The information you have given in this application is complete, true, and submitted for the purpose of opening a deposit account with BECU now and/or later. You understand that we may rely on this information in our dealings with you now and in the future, and that it is a federal crime to willfully and deliberately provide incomplete or incorrect information to a state chartered credit union insured by the NCUA; (4) BECU may accept any order and instruction regarding the account(s) and any request for future services from the Primary or any Joint Account Holder(s) without the consent of or notice to the other Account Holder(s); (5) By requesting checks, you authorize BECU to debit the cost of the checks from your Checking Account at the time of the check order; (6) BECU may make inquiries necessary to evaluate your applications and to conduct periodic reviews of your BECU accounts, including ordering a credit report, and you instruct BECU to obtain and use such information in determining to notify you about other products and services. You agree that we may tell others about our credit experience with you, and may report information about your accounts to credit bureaus. Late payments, missed payments, or other defaults on your accounts may be reflected in your credit report; (7) All of the credit or other information concerning you that BECU may obtain now or in the future will be compiled, stored, and used in accordance with BECU's Privacy Notice as amended from time to time; (8) By providing your email address, you agree that BECU may send marketing material to you electronically; (9) BECU and its service providers may contact you for non-marketing purposes at any telephone number you provide. BECU may use automated telephone dialing, text messaging systems, and electronic mail to contact you. The telephone messages are played by a machine automatically when the telephone is answered and may be recorded by your answering machine. Standard data and message rates may apply and you agree that BECU will not be liable for such fees. You agree to update us promptly when your telephone number changes. At any time, you may update such information or revoke your consent to receive non-emergency calls or text messages at a telephone number assigned to a wireless device (or any service that charges on a per-call basis) by contacting us at 800.233.2328 or other reasonable means.

Signatures

PRIMARY MEMBER SIGNATURE	DATE
JOINT ACCOUNT HOLDER SIGNATURE (1)	DATE
JOINT ACCOUNT HOLDER SIGNATURE (2)	DATE

As primary member and/or joint account holder, I personally verified and confirmed all information displayed in sections 1 through 5 on the first page of this form, and sections 6 and 7 on the second page of this form. All such information is accurate, complete, and true, and BECU may rely on such information in BECU's dealings with me.

PRIMARY MEMBER INITIAL	JOINT ACCOUNT HOLDER INITIAL	JOINT ACCOUNT HOLDER INITIAL
BECU Use Only	NEW ACCOUNT NUMBERS:	DATE
		REP
		<input type="checkbox"/> ID Verified <input type="checkbox"/> OFAC on new name

If form is not submitted electronically, please return completed and signed form to:
BECU MS 1094-2, PO Box 97050, Seattle, WA 98124-9750 or fax to 206.805.5612