

# Navy Federal® Membership Agreement and Tax ID Certification

Please print and use black ink pen to fill in the blanks.

This form is **NOT** to be used to change member data, add or remove a joint owner on an existing account, or change account information. To add a joint owner, please submit a "Change of Information/Add Joint Owner" form (97CI).

A. Member Information						
Name: First	MI	Last	Suffix	Access No.	Date of Birth (MM/DD/YY)	Social Security No. (SSN)
Joint Owner (if applicable): First	MI	Last	Suffix	Access No.	Date of Birth (MM/DD/YY)	Social Security No. (SSN)

## B. Disclosure Agreement and Survivorship Designation

**Account Disclosures:** I/We acknowledge that membership at Navy Federal comes with certain ongoing responsibilities. By signing this document, I/we acknowledge receipt of and agree to all terms and conditions in the Important Disclosure booklet and all other disclosed terms and conditions of all accounts and services that I/we may receive at Navy Federal. These terms and conditions will be disclosed in accordance with applicable state and federal laws.

**Consumer Reports:** I/We authorize Navy Federal to obtain a consumer credit report to evaluate my/our creditworthiness so that I/we may be considered for other Navy Federal products and services. I/We also authorize Navy Federal to obtain consumer reports for the purposes of evaluating this membership application and reviewing any Navy Federal accounts I/we open. I/We understand these reports may be used in decisions to deny account applications, close accounts, and/or restrict accounts or services.

**Escheatment:** I/We acknowledge that my/our property may be transferred to the appropriate state (i.e., "escheated") if there has been no activity on any of my/our accounts within the time period specified by state law.

**Identification:** Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account, including joint owners and authorized signers. *What this means for you:* When you open an account, we will ask you 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. It may be necessary for Navy Federal to restrict account access or delay the approval of loans pending further verification of your identity or documentation related to your eligibility.

**Statutory Lien:** I/We acknowledge and pledge to Navy Federal a statutory lien in my/our shares and dividends on deposit in all joint and individual accounts and any monies held by Navy Federal now and in the future, to the extent of any loan made and any charges payable. The statutory lien does not apply to shares in any Individual Retirement Account.

**Security Interest:** I/We acknowledge and pledge to Navy Federal a security interest in the collateral securing loan(s) that I/we have with Navy Federal now and in the future, including any type of change or increase, and any proceeds from the sale of such collateral and of insurance thereon, not to exceed the unpaid balance of the loan. This security interest in collateral securing loans does not apply to any loan(s) on my/our primary residence.

**Contractual Lien:** I/We authorize Navy Federal to transfer funds from any accounts in which I/we have an ownership interest to correct a negative or overdrawn amount on any account on which my/our name(s) appear(s). My/Our authorization applies to all funds I/we voluntarily deposit into Navy Federal accounts, including Social Security funds, as permitted by law.

**Joint Account—With Survivorship**  
(On the death of an account owner, the deceased's shares pass to the surviving owner.)

**Joint Account—No Survivorship**  
(On the death of an account owner, the deceased's shares pass to the estate.)

The survivorship designation on my membership/savings account applies to all other joint accounts with the same joint owner, unless specifically designated otherwise for a particular account in writing. If a survivorship option has not been indicated here, my accounts will be designated as Joint with Survivorship.

<p><b>Tax Certification (This certification does not apply if I have checked the box below my signature.)</b></p> <p>Under penalties of perjury, I certify that (1) the SSN/ITIN provided on this form is correct, (2) I am not subject to backup withholding, and (3) I am a U.S. citizen or U.S. resident alien.</p>
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## C. Required Signatures

By signing, I/we acknowledge that I/we have read and agree to the information/disclosure above.

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 (required)	Date (MM/DD/YY)

By checking this box, I certify that I am a non-resident alien and I have completed a Form W-8BEN.

Signature of Joint Owner (if applicable)	Date (MM/DD/YY)

By checking this box, I certify that I am a non-resident alien and I have completed a Form W-8BEN.

**Account Funding—A \$5.00 deposit is required to establish membership.**

