

Personal Information/Address Change Form

- Please be sure to sign and date in section 3 on reverse side
- Please print clearly in black ink only and initial any changes to this form
- Non-U.S. Citizens or U.S. Persons (including U.S. Resident Aliens) must submit IRS form W-8BEN

Member Account Number _____

1 Account Information

I would like to update the following information on my Alliant account(s):

- Member name change and signature (Please include a copy of your marriage certificate, divorce decree, government issued driver's license or court ordered name change.)

Previous Name:

First Name _____ Middle Name _____ Last Name _____

New Name:

First Name _____ Middle Name _____ Last Name _____

Mothers Maiden Name (required) _____

- New SSN or ITIN _____
• **Social Security Number change requires submitting IRS form W-9**
• **Please submit a copy of social security or ITIN card**

New E-mail Address _____

New Home Phone Number _____

New Cell Phone Number _____

New Work Phone Number _____

New Password _____

- Change of Address (*This change of address will also be made to all of your associated accounts with the member number provided above including your VISA® credit card, if applicable. A separate form must be submitted for each account that you are a Joint Owner on.*)

Primary Address Secondary Address Joint Owner Address

Previous Address:

Street Address (include unit #) _____

City _____ State/Province _____ Zip/Postal Code _____ Country _____

New Address:

Street Address (include unit #) (no P.O. Box if primary address) _____

City _____ State/Province _____ Zip/Postal Code _____ Country _____

- Employment Status: Employed Homemaker Retired
 Self employed Student Unemployed

Occupation-if retired, previous occupation _____

Employer Name-if student, School Name _____

Employer/School City, State and Country _____

continued on reverse 

2 New Cards and Checks

- **Visit Alliant Online Banking if you would like to order new checks reflecting your new name and/or new address.** *Note: You will be responsible for the purchase price of the checks.*
- **If you currently have a VISA® Credit Card, VISA® Debit Card and/or Convenience Card, would you like a replacement card reflecting your name change?** *Note: Cards will be mailed to the primary address on record for the Member.*

YES NO

- VISA® Credit Card** – available to current cardholders only
- VISA® Debit Card** – available to current cardholders only
- Convenience Card** – available to current cardholders only

3 Signature

X

Member Signature (required)

Date

MINOR ACCOUNTS: If member is a child under the age of 12, a parent, grandparent or guardian must sign the child's name and their own name and date (i.e. "John Smith, a minor, by parent, Mary Smith").

Important: To avoid processing delays, Non-U.S. Citizens or U.S. Persons (including U.S. Resident Aliens) should complete and return a W8-BEN form (available at www.alliantcreditunion.org) with your completed Personal Information/Address Change Form.

FOR OFFICE USE ONLY:

1 Processing: Teller ID _____ Service Center/Dept. _____ Date _____

2 Imaging: Forward to Imaging (Steps 1 & 2 must be completed prior to Imaging.)

COMPLETE FORM AND RETURN:

- Fax to: 773-462-2124
- Mail to: Alliant Credit Union
Attn: Account Services
P.O. Box 66945
Chicago, IL 60666-0945
- Stop by your local Alliant Service Center

FOR MORE INFORMATION:

Call 773-462-2000
or toll-free 800-328-1935
TDD/TTY 773-462-2300



P.O. Box 66945, Chicago, IL 60666-0945
www.alliantcreditunion.org



Equal Housing Lender

Your savings federally insured to at least \$250,000
and backed by the full faith and credit of the
United States Government

NCUA

National Credit Union Administration,
a U.S. Government Agency