## M&C (Menlo Park) FCU

C/O BASF Corporation 25 Middlesex-Essex Turnpike Iselin, NJ 08830 (732) 205-5199

FOR CREDIT UNION USE ONLY

Date of Membership:

AC	S	IINI	TC	ARD

Account No:

Member Verification:

Member Name:	Signature:					
ACCOUNT TYPE (Choose One)						
All of the terms, conditions, form of account ownership, account is listed unless the Credit Union is notified in writing of a change		indicated on th	is card apply to all the accounts			
Share/Savings – <u>Individual</u> with POD (Fill out Sections 1 & 2 only)	☐ Share/Savings – <u>Joint Account</u> with Rights of Survivorship (Fill out Sections 1 & 3 only)					
Section 1: MEMBER APPLICATION AND OWNERSHIP INFORMATION						
Street: (	Dity:	State:	_ Zip Code:			
Home Phone: Work Ph						
SSN: Driver Lic. No.	/State:	Dat	te of Birth:			
Membership Eligibility: ☐ BASF Employee ☐ Family Member ☐ Other						
TIN CERTIFICATION AND BACKUP WITHHOLDING INFORMATION						
IRS that I am subject to backup withholding as a result of I am no longer subject to backup withholding, (3) I am a U.S. citizen or other U.S. person. For federal ta a U.S. citizen or U.S. resident alien; a partnership, corpor under the laws of the United States; an estate (other than 301.7701.7).  Certification Instructions. Cross out item 2 above if you have you have failed to report all interest and dividends on your tax	x purposes, you are considered a ation, company, or association cre a foreign estate); or a domestic tr	U.S. person if the sated or organizated or organizates (as defined currently subject	you are: an individual who is zed in the United States or I in Regulations section to backup withholding because			
Section 2: Individual Account - Payable on Death (POD) Designation						
POD Payee Name:		SSN:				
Street:						
POD Payee Name:	SSN:					
Street:	City:	_ State:	Zip Code:			
Section 3: <u>Joint Account</u> - Joint Owner Information						
Joint Owner Name:	Owner Name: SSN:					
Street:			Zip Code:			
Phone: Date of Birth:	E-	-mail:				
Joint Owner Signature:			Date:			
AUTHORIZATION: By signing above, I/we agree to the terms and conditions of t applicable, and to any amendment the Credit Union makes from time to time which accounts and services requested herein. If an access card or EFT service is requ	n are incorporated herein. I/we have received an	id read the agreemer	its and disclosures applicable to the			

Agreement and Disclosure. The IRS does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Opened/Approved by: