

Send Completed Form To: (Select One)

MAIL: REALTORS® FCU | Attn: Business Services 9707 Key West Ave. #201 | Rockville, MD 20850
 FAX: 301.355.6845
 SCAN: 1) Scan & Save 2) Sign In Online Banking 3) Click Documents Tab 4) Upload Document
 5) Click Message Tab to Send Us a Message That Your Document Is Ready

To request confirmation of receipt, please Sign In Online Banking and send us a message.
Please allow 2-3 business days for processing.

Business Name: _____ **Account#:** _____

REMOVE AUTHORIZED SIGNER(s) (To ADD New Authorized Signers, Complete PAGE 2)

REMOVE Authorized Signer(s):		
_____	_____	_____
Please Print: First & Last Name	Please Print: First & Last Name	Please Print: First & Last Name
REMAINING Authorized Signers:		
_____	_____	_____
Please Print: First & Last Name	Please Print: First & Last Name	Please Print: First & Last Name

CHANGE 'INQUIRY ONLY' SIGNER(s)

REMOVE 'Inquiry Only' Signer(s):		
_____	_____	_____
Please Print: First & Last Name	Please Print: First & Last Name	Please Print: First & Last Name
REMAINING & NEW 'Inquiry Only' Signer(s): (Send copy of photo ID for each)		
_____	_____	_____
Please Print: First & Last Name	Please Print: First & Last Name	Please Print: First & Last Name
Create a new PASSWORD (for use when calling REALTORS® FCU): _____		

Signature Authorization:

Must be signed by an Authorized Signer listed above who is going to remain on the account or signer name that appears in most current Board or Business Meeting Minutes. I authorize the Credit Union to accept the following changes to our account.

Print: Authorized Signer First & Last Name Signature Date



Business Account Change Card

ADD NEW* AUTHORIZED SIGNER(s)

* Must send a copy of updated Business or Board Meeting Minutes reflecting approval of new signer(s).

New Authorized Signer #1 - Name SSN# / TIN D.O.B. Mother's Maiden Name

Street Address City State Zip

Day Time Phone Email Address

Valid Picture ID # ID Type Date Issued Exp. Date State

Signature (Attach copy of unexpired government issued photo ID, IE: Drivers License) Date

New Authorized Signer #2 - Name SSN# / TIN D.O.B. Mother's Maiden Name

Street Address City State Zip

Day Time Phone Email Address

Valid Picture ID # ID Type Date Issued Exp. Date State

Signature (Attach copy of unexpired government issued photo ID, IE: Drivers License) Date

New Authorized Signer #3 - Name SSN# / TIN D.O.B. Mother's Maiden Name

Street Address City State Zip

Day Time Phone Email Address

Valid Picture ID # ID Type Date Issued Exp. Date State

Signature (Attach copy of unexpired government issued photo ID, IE: Drivers License) Date

FOR INTERNAL USE ONLY:

Date Form Received:

Date

REALTORS[®]FCU Employee:

Processed

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

REALTORS[®] FCU is insured by the NCUA