



Thank you for your recent request to change your name and/or ownership on your accounts. In order to complete your request, we are enclosing the form(s) described below.

Please note that each form must be completed in its entirety in order for us to be able to process your request.

Name Change

- Enter the account number of the account you are requesting to change.
 - A separate form is required for each membership account
 - Requests must be accompanied by appropriate legal documentation (*Marriage License or Divorce Decree with order to restore former name*) denoting name change and a photocopy of your unexpired driver's license or state identification card reflecting present name.
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Adding Joint Owner(s)

Joint Application

1. Enter the account number and suffix in the top right corner of the form.
2. A joint application must be completed for each joint owner.

Signature Card

1. Enter the account number and suffix in the top right corner (*only one account per signature card*).
 2. Check the type of account. Print name, birthdate, and social security number for **each** owner and joint owner.
 3. The primary member and all joint owners must sign.
 - A minor may not be added as a joint owner.
 - Requests submitted by mail or dropped off must be accompanied by a photocopy of an unexpired drivers' license.**
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Release of Joint Owner(s)

Joint Ownership Release Form

1. Enter the member number and all applicable suffix number(s) from which the joint owner is being removed.
 2. Print the primary member's name on the line provided.
 3. The **signature** of the joint owner being released is required on the signature line and the joint owner's name should also be printed below the signature line.
 - The signature must be witnessed by someone other than the current account owner.
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Adding Beneficiary

Signature Card

1. Enter the account number and suffix in the top right corner (*only one account per signature card*).
 2. Check the type of account. Print name, birthdate and social security number for each owner and joint owner.
 3. Print beneficiary name, date of birth, social security and relationship of each beneficiary(ies) you wish to designate.
 4. The primary member and all joint owners must sign.
 - The signature of all joint owners is required.
 - Joint owners may not be listed as beneficiaries.
 - Designating a new beneficiary will supersede all previous designations.
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Release of Beneficiary

Release Agreement for Payable-On-Death Account Form

1. Enter the member number and list all applicable account suffix number(s).
 2. Print the primary member's name on the line provided.
 - The primary member must **sign** the release agreement for payable upon death form to release prior beneficiaries.
 - A release agreement is required only if new beneficiaries are not designated.
 - The signature must be witnessed by someone other than the current account owner.
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If assistance is needed, please contact us at 800-999-5887.

Identification Requirements

Federal law (Section 326 of the US PATRIOT ACT) requires all financial institutions to: obtain, verify, and record information that identifies each **individual**.

Upon approval and acceptance of a service or product, we will ask for your: name, address, date of birth, and other information that will allow us to identify you. Please follow the instructions below to avoid delays in our service to you.

Instructions

For new accounts and changes to existing accounts, additional forms will be required.

A photocopy of your unexpired identification must accompany requests submitted by mail or dropped off.

If you are a US Citizen or Permanent Resident Alien of the United States, please provide a legible photocopy of one of the following:

- U.S. Driver's License
- State Identification Card

**If the address provided not match your identification, additional verification of your physical address is required.*

Please contact Suncoast Credit Union for questions regarding requirements at (813) 621-7511 or 1-800-999-5887.

Return your request along with required documentation to:

Suncoast Credit Union
Attn: Account Operations
P.O. Box 11904
Tampa, FL 33680-1904

If you are not a US Citizen or Permanent Resident Alien of the United States, please contact our Member Care Center at (813) 621-7511 or 1-800-999-5887 to obtain identification requirements.



Account # _____

SSN _____

NAME CHANGE

MEMBER/JOINT OWNER

A separate form is required for each membership account number.

I hereby request and authorize Suncoast Credit Union to change my name on all accounts.

From _____ to _____
(current name) (new name)

I understand all prior joint owners/beneficiaries will remain in effect unless the applicable form is executed.

This request will change all accounts under the above referenced member number.

Requests must be accompanied by appropriate legal documentation denoting name change and a photo copy of your Driver License or State Identification card reflecting new name.

Date

Signature

CREDIT UNION USE ONLY

Date _____ Service Center _____ Processor _____