

Check One

- Opening New Share(s)
- Modifying Existing Share(s)



ACCOUNT OWNER DESIGNATION

(PLEASE PRINT OR TYPE ALL INFORMATION)

1. Member Information

Member Name (First, Middle, Last)	Social Security Number
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2. Share Account(s)

<input type="checkbox"/> Savings <input type="checkbox"/> Secondary Savings _____ <input type="checkbox"/> Premier Savings <input type="checkbox"/> Honda Cash Funding <input type="checkbox"/> Bill Payment <input type="checkbox"/> HAM Business Checking	<input type="checkbox"/> Checking # _____ <input type="checkbox"/> Interest Checking # _____ <input type="checkbox"/> Premier Checking # _____ <input type="checkbox"/> Overdraft from Savings _____ <input type="checkbox"/> Overdraft from Visa® _____ <input type="checkbox"/> No Overdraft _____	<input type="checkbox"/> Money Market # _____ Type _____ <input type="checkbox"/> Savings Certificate – Term _____ Type _____ <input type="checkbox"/> Other _____
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3. Add joint owner(s) of Shares indicated above

Mark box if you have more than two (2) joint owners.

JOINT OWNER 1					
Name (First, Middle, Last)		Date of Birth	Social Security Number		Relationship to Member
Street Address		City		State	Zip Code
Mother's Maiden Name			Employer/Occupation		
JOINT OWNER 2					
Name (First, Middle, Last)		Date of Birth	Social Security Number		Relationship to Member
Street Address		City		State	Zip Code
Mother's Maiden Name			Employer/Occupation		

4. Pay-On-Death beneficiaries of Shares indicated above

Mark box if you have more than two (2) joint owners.

In the event of Your death, You hereby designate the following beneficiary(ies):

Name (First, Middle, Last)	Percentage	Name (First, Middle, Last)	Percentage
Social Security Number	Date of Birth	Social Security Number	Date of Birth

Initial here if you wish to designate the aforementioned beneficiaries for **all of your existing share accounts** (IRA accounts excluded). This supersedes previous beneficiary designations within this membership account.

Consent of Spouse (if beneficiary is other than spouse)
(for community property state only)

Signature of Spouse

Date

5. Signatures & Disclosures

You hereby make application for the account(s)/services indicated and agree to conform to all Credit Union bylaws and applicable State and Federal laws. You certify the signature(s) and all information herein applies to all accounts designated above, and all information provided is true and correct. You also acknowledge that You have received and agree to be bound by any terms and conditions in this application, and in the Accounts & Services of the Credit Union Booklet, Truth-in-Savings Act, Rate and Fee Schedule, and any Special Loan, Account or other separate Account Service Applications or Agreements, which are incorporated herein by reference. The Credit Union or its agent is authorized to investigate You/Your creditworthiness, employment history, and to obtain a credit report and to answer questions about You/Your credit history with Us. Your credit report may also be used to pre-determine Your possible eligibility for various Honda Federal Credit Union products and services. You understand that any false or misleading statements in Your application may cause termination of any or all accounts/services.

You understand that if this Account Owner Designation is also an application to include a joint owner(s), that by making this a joint account, all owners of the account will have the same access to the account(s) and account service(s), and will share the same responsibilities for items deposited and/or repayment, regardless of contribution. You agree that We may impress and enforce a statutory lien upon any and all Accounts with Us to the extent You owe Us any money.

You understand and agree that the Patriot Act of 2001 obligates all persons seeking to open an account to fully comply with the identity verification requirements of the Bank Secrecy Act, as amended from time to time.

TRANSACTIONS TO/FROM ANY ACCOUNTS MAY BE LIMITED UNTIL IDENTITY VERIFICATION OF ALL APPLICABLE PERSONS IS COMPLETE.

Primary Owner Signature

Date

Joint Owner #1 Signature

Date

Joint Owner #2 Signature

Date

CREDIT UNION USE ONLY / CIP VERIFICATION					
Member Account Number	Share ID(s)	Opened by	Date	<input type="checkbox"/> o/o	<input type="checkbox"/> Address verified
				<input type="checkbox"/> CIP required & attached	