



7905 Malcolm Road - Suite 311
 Clinton, MD 20735
 (800) USPS-FCU (877-7328) Fax: (301) 856-4061

Checking & E-Services Application

ACCOUNT NUMBER: _____

PRIMARY APPLICANT

LAST NAME		FIRST NAME		MI
DATE OF BIRTH	SOCIAL SECURITY NUMBER	STREET ADDRESS		
MOTHER'S MAIDEN NAME	DRIVER'S LICENSE NUMBER	CITY	STATE	ZIP
HOME PHONE	WORK PHONE/EXT.	<input type="radio"/> OWN <input type="radio"/> RENT		LENGTH AT RESIDENCE
CELL PHONE	EMAIL ADDRESS			

PRESENT EMPLOYER

NAME AND ADDRESS OF EMPLOYER			
PHONE	YEARS THERE	JOB TITLE	ANNUAL SALARY/WAGES \$

MEMBER SECURITY CODE

Choose 6 digits for possible phone or other transaction verification.
 Numbers 0-9, letters A-Z

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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JOINT APPLICANT

LAST NAME		FIRST NAME		MI
DATE OF BIRTH	SOCIAL SECURITY NUMBER	STREET ADDRESS		
MOTHER'S MAIDEN NAME	DRIVER'S LICENSE NUMBER	CITY	STATE	ZIP
HOME PHONE	WORK PHONE/EXT.	<input type="radio"/> OWN <input type="radio"/> RENT		LENGTH AT RESIDENCE
CELL PHONE	EMAIL ADDRESS	RELATION TO PRIMARY MEMBER		

PRESENT EMPLOYER

NAME AND ADDRESS OF EMPLOYER			
PHONE	YEARS THERE	JOB TITLE	ANNUAL SALARY/WAGES \$

ADDITIONAL SERVICES

<input type="checkbox"/> Add Joint Owner	<input type="checkbox"/> Money Market Checking	<input type="checkbox"/> VISA Check Card
<input type="checkbox"/> Interest Checking	<input type="checkbox"/> Overdraft Line of Credit*	<input type="checkbox"/> QUE Telephone Teller
<input type="checkbox"/> Access Checking	<input type="checkbox"/> Transfer from Savings**, then Approved Line of Credit**	Personal Identification Number to be used for QUE 24/7 Telephone Teller
<input type="checkbox"/> Virtual Branch Home Banking	<input type="checkbox"/> Transfer from Approved Line of Credit, then Savings	
<input type="checkbox"/> Online BillPayer Service	* On approved credit ** Transfer fee will be assessed. See current schedule of fees.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

NUMBERS ONLY (All PINs are the same for any Co-Owner)

SIGNATURE(S)

By signing below, I/we agree to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Rate and Fee Schedule, and Funds Available Policy Disclosure. If an access card or Electronic Funds Transfer (EFT) service is requested and provided, I/we agree to the terms of and acknowledge receipt of EFT. The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding. By signing below, I/we hereby make application to USPS FCU to check my credit history for any reason, including verification of the information on this application.

I/we understand I/we will receive all product/service disclosures after my/our application is approved, and that some services require credit approval. I/we agree that I/we have read and agree to all terms and conditions.

_____ PRIMARY APPLICANT'S SIGNATURE	_____ DATE	_____ JOINT APPLICANT'S SIGNATURE	_____ DATE
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Print

ALL QUESTIONS MUST BE ANSWERED TO COMPLETE APPLICATION AND AVOID DELAYS IN OPENING ACCOUNT

Are you a frequent traveler?

No

Yes

If Yes: Do you frequently travel outside of the United States?

No

Yes - Please list all countries to which you frequently travel: _____

Will your initial deposit exceed \$5000?

No

Yes - What is the source of your funds? _____

Will you deposit or write checks?

No

Yes - Will any of your deposits be made via a mobile device such as a smartphone or tablet?

Yes

No

Will you deposit or withdraw cash in-person or via an ATM?

No

Yes - Approximately how much will you deposit/withdraw each month? _____

Will you be sending or receiving wire transactions?

No

Yes - What is the monthly total of wire transactions you expect to send? _____

What is the monthly total of wire transactions you expect to receive? _____

Will you be receiving wires from outside of the USA? Yes No

If Yes: Please list all countries from which you expect to receive a wire transaction:

Will you send or receive money electronically? Examples of this would be direct deposit of payroll, electronic payment to a creditor, or payments sent using BillPayer.

No

Yes - What is the monthly total of ACH/non-wire transactions you expect to send? _____

What is the monthly total of ACH/non-wire transactions you expect to receive? _____

Will you be sending or receiving ACH/non-wire transactions from outside the USA?

Yes

No

If Yes: Please list all countries to or from which you expect to send or receive ACH/non-wire transactions: _____