



**BUSINESS & NONPROFIT ORGANIZATION  
CREDIT UNION MEMBERSHIP & DEPOSIT ACCOUNT APPLICATION**

Self-Help Federal Credit Union PO Box 3619 Durham, NC 27702-3619 800-966-7353 www.self-help.org

Self-Help Federal Credit Union may be referred to as "Credit Union".

**ACCOUNT #**

**MEMBERSHIP IDENTIFICATION REQUIREMENTS**

The following documentation and information is required of any person listed on this business application or the corporate resolution as an account holder and/or account signatory.

Copy of a valid driver license, passport, or government-issued photo ID card acceptable to the Credit Union  
Evidence of physical address if different from ID

Applicants must provide the tax identification number and documentation of the business, specific to the type business, as follows:

**Corporation:** 1) Employer Identification Number; and 2.) Articles of Incorporation

**Partnership:** 1) Employer Identification Number

**LLC and PLLC:** 1) Employer Identification Number; and 2.) Articles of Organization

**Sole Proprietorship:** 1) Social Security Number if there are no employees, or Employer Identification Number (EIN) if there are employees; and 2.) Assumed Name or similar certificate showing business name is authorized under applicable law and that it has been approved by the appropriate governmental authority

Applicant must complete and submit the Credit Union's **Corporate Resolution & Signature Authority** form.

**MEMBERSHIP ELIGIBILITY**

Membership in the Credit Union is open to any person or organization which is, or becomes, a member of the Center for Community Self-Help (CCSH) and maintains a deposit account in the Credit Union of at least \$5. There is a one-time \$20 tax-deductible non-refundable membership fee to join CCSH which is a 501 (c) (3) nonprofit corporation dedicated to creating and protecting ownership and economic opportunity for people of color, women, rural residents, and low-wealth families and communities.

**MEMBERSHIP INFORMATION**

Account Holder \_\_\_\_\_ (Print)

Use the business/organization name as the Account Holder.

Sole Proprietorship: Also enter the business owner's full name on the Account Holder line. Full name must match TIN below.

Ownership Type \_\_\_\_\_

(Corporation, Partnership, LLC, PLLC, or Sole Proprietorship)

Taxpayer ID Number (TIN) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

(If not the same as street address)

City

State

Zip Code

**AUTHORIZED SIGNER (PRIMARY CONTACT PERSON)**

Authorized Signer \_\_\_\_\_ (Print)

First

Middle

Last

Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_

**TOTAL AMOUNT OF DEPOSIT \$** \_\_\_\_\_

Include the membership fee along with your account deposit or the Credit Union will deduct the amount from your account deposit.



## ACCOUNT SELECTION

### SAVINGS

**Regular Savings Account** Amount \$ \_\_\_\_\_ ( ) Check here to request a free ATM-only card.

### CHECKING

Fees may apply. See fee schedule on our website.

**Business Checking** Amount \$ \_\_\_\_\_

**Nonprofit Organization Checking** Amount \$ \_\_\_\_\_

Indicate your [free] card choice ( ) debit card, or ( ) ATM-only card ( ) Check here to request printed checks (*charge applies.*)  
( ) Overdraft Transfer

### MONEY MARKET ACCOUNT

Minimum balance of \$500. Fees may apply. See fee schedule on our website.

**Money Market** Amount \$ \_\_\_\_\_

( ) Check here to request printed checks (*charge applies*) ( ) Check here to request a free ATM-only card

### TERM CERTIFICATE ACCOUNT

\$500 minimum deposit to open each certificate.

**Term Certificate** Amount \$ \_\_\_\_\_ Term \_\_\_\_\_ 3 – 6 – 12 – 18 – 24 – 36 – 48 – 60 months

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### Economic Development

**Term Certificate** Amount \$ \_\_\_\_\_ Term \_\_\_\_\_

The dividend rate of the Economic Development term certificate will be set below the rate of the standard term certificate of the same term length.

**OPTIONAL:** Certificate earnings (dividends) will be added to the certificate balance unless the account holder chooses one of the following options:

( ) Issue check ( ) Monthly ( ) Quarterly

( ) Deposit my certificate dividends into the following Credit Union account \_\_\_\_\_ ( ) Monthly ( ) Quarterly

## AGREEMENT AND AUTHORIZATION SIGNATURE(S) & BACKUP WITHHOLDING CERTIFICATION

By signing below, the Account Holder agrees to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Disclosure, Funds Availability Policy, Electronic Fund Transfers Agreement and Disclosure, Privacy Notice Disclosure, and Rate and Fee Schedules and to any amendments the Credit Union may make from time to time, which are incorporated therein. The Account Holder acknowledges receipt of a copy of the abovementioned disclosures, and any other agreements and disclosures applicable to the accounts and services requested herein. Additionally, the Account Holder specifically consents and agrees that the Credit Union may provide the abovementioned legally required disclosures electronically on the Credit Union website, or in writing, or both.

Each signer affirms the following: Under penalty of perjury, I certify that (1) that the number shown on this form is the Account Holder's correct Taxpayer Identification Number, and (2) the Account Holder is not subject to backup withholding either because it has not been notified that it is subject to backup withholding as a result of a failure to report all interest or dividends, or because the Internal Revenue Service (IRS) has notified the Account Holder that it is no longer subject to backup withholding. Cross out item 2 above if the IRS has notified the Account Holder that it is currently subject to backup withholding because of a failure to report all interest and dividends on the tax return of the Account Holder. Initial this section if you cross out item 2.

In accordance with provisions of the Unlawful Internet Gambling Enforcement Act of 2006 and Regulation GG which are effective June 1, 2010, restricted transactions are prohibited from being processed through your account or relationship with the Credit Union. "Restricted transaction" means any transaction in which a person knowingly accepts, in connection with participation in unlawful internet gambling (i) credit or the proceeds of credit (ii) electronic funds transfers or funds transferred through a money transmitting business, or the proceeds from such transfers or (iii) checks, drafts, or any similar instruments. By signing below, the signers certify on behalf of the Business that it does not engage in an internet gambling business.

Yes, the Account Holder wants to open the Credit Union account(s) identified above, and become a member of the Credit Union if the Account Holder is not already a member of the Credit Union. Furthermore, the Account Holder affirms its commitment to the mission of the Center for Community Self-Help and acknowledges that the Account Holder is making a \$20 membership contribution to CASH. As authorized signer(s) of the business/organization, I/we hereby authorize the Credit Union to open the account(s).

### Authorized Signature of Account Holder

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Signing this document authorizes the Credit Union to run a credit check on any signers and any account holders whose names appear on this application

**FACT ACT:** If you have a loan with the Credit Union, we may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

### OFAC Screening

*For Credit Union Use Only*

Credit Union personnel must complete this screening before opening the account, and initial here \_\_\_\_\_

# Corporate Resolution and Signature Authority

## Designating Self-Help Federal Credit Union "Credit Union" as Depository

**A. Business / Organization (Account Holder):** \_\_\_\_\_

Address: \_\_\_\_\_  
(Street, City, State, Zip Code)

Taxpayer ID Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Ownership Type:  Corporation  LLC  Partnership  Sole Proprietorship  Other (specify): \_\_\_\_\_

Each signer affirms the following: Under penalties of perjury, I certify (1) that the number shown on this form is the Account Holder's correct Taxpayer Identification Number and (2) that the Account Holder is not subject to backup withholdings either because it has not been notified that it is subject to backup withholding as a result of failure to report all interest or dividends, or the Internal Revenue Service has notified it that it is no longer subject to backup withholdings (if you are subject to backup withholdings, mark out statement 2 and initial this paragraph). This agreement also applies to other deposit and savings accounts.

The Internal Revenue Service does not require your consent to any provisions of this document other than the certifications required to avoid backup withholdings.

The signature(s) on this agreement should match the signature(s) on the account application form. In the event of any difference, this Resolution & Signature Authority will be the ruling document.

Account # \_\_\_\_\_  
(for credit union use only)

<b>B. Name(s) of Authorized Signer(s) on the Account</b> <i>(print)</i>	<b>Title</b>	<b>Signature</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Be it Hereby Resolved (Authorized):

That Self-Help Federal Credit Union, (hereafter referred to as the Credit Union) is designated as a depository for the funds of this Organization.

1. Resolved, that the deposit and/or term certificates be opened and maintained in the name of this Organization with the Credit Union in accordance with the applicable rules and regulations for such accounts, including, but not limited to, the Membership Agreement and other disclosures and rate & fee schedules; that any one of the above officers, employees, partners, members or managers of this Organization is/are hereby authorized on behalf of this Organization and in its name to sign checks, drafts, notes, bill of exchanges, acceptances, term certificates, or other orders for the payment of money; to endorse checks, notes, bills, term certificates, or other instruments owned or held by this Organization for deposit with the Credit Union or for collection or discount by the Credit Union to accept drafts, acceptances, and other instruments payable at said Credit Union; to place orders with the Credit Union for the purchase and sale of foreign currencies on behalf of this Organization; to execute and deliver an electronic funds transfer agreement and to appoint and delegate, from time to time, such persons who may request transfers on behalf of the Organization; to waive presentment, demand, protest, and notice of protest, or dishonor any check, note, bill, draft, or other instrument made, drawn or endorsed by the organization. And the above "Specimen Signatures" are the true and actual signatures of such authorized officers, employees, partners, members, or managers of this Organization; and,

2. Further Resolved, that the Credit Union be and it hereby is authorized to honor, receive, certify, or pay all instruments signed in accordance with foregoing resolution even though drawn or endorsed to the order of any officers, employees, partners, members or managers signing the same or tendered by him cashing, or in payment of the individual obligation of such officer, employee, partner, member or manager, or for deposit to his or her personal account, and the Credit Union shall not be required or be under any obligation to inquire as to the circumstances of the issuance or use of any instrument signed in accordance with the foregoing resolution, or the application or disposition of such instrument or the proceeds thereof; and,

3. Further Resolved, that the Credit Union is hereby requested, authorized and directed to honor checks, drafts, or other orders for the payment of money drawn in this Organization's name, including those payable to the individual order of any person or persons whose name or names appear thereon as signer or signers thereof, when bearing or purporting to bear the facsimile signature(s) of the specified number of the foregoing officers, employees, partners, members or managers of this Organization, and the Credit Union shall be entitled to honor and to charge this Organization for such checks, drafts, or other orders, regardless of by whom or by what means the actual or purported facsimile signature thereon may have been affixed thereto, if such signatures resemble the facsimile specimen duly certified to or filed with the Credit Union by the Secretary, Assistant Secretary or other authorized officer of this organization or manager or member (if a limited liability company); or general partner (if a general or limited partnership) and,

4. Further Resolved, that the Secretary, Assistant Secretary, or other authorized officer, partner, or manager of this Organization shall certify to the Credit Union that the name of the persons who are at present authorized to act on behalf of this Organization under the foregoing resolutions and shall from time to time hereafter, as changes in the personnel of said officers, members or managers and employee are made, immediately certify such changes to the Credit Union by submission of a new Resolution and Signature Authority (with new signatures), and the Credit Union shall be fully protected in relying on such certifications of the Secretary, Assistant Secretary or other authorized officer, member or manager and shall be indemnified and saved harmless from any claims, demands, expenses, loss, or damage resulting from, or growing out of, honoring the signature of any officer, employee, partner, member or manager so certified, or refusing to honor any signature not so certified; and,

5. Further Resolved, that the foregoing resolution shall remain in full force and effect until written notice of their rescission shall have been received by the Credit Union and apply to any and all deposit accounts and/or term certificates in the name of this Organization, regardless of whether the account number assigned by the Credit Union appears or does not appear on the face of this form or Resolution and Signature Authority; and that receipt of such notice shall not affect any action taken by the Credit Union prior thereto; and,

6. Further Resolved, that all transactions by any of the officers, employees, partners, members, or managers of this Organization on its behalf, and in its name, with the Credit Union prior to the delivery to the Credit Union of a certified copy of the foregoing resolution are, in all respects, hereby ratified, confirmed, approved, and adopted; and,

7. Further Resolved, that the Secretary, Assistant Secretary or other authorized officer, partner, members, or managers be, and hereby is, authorized and directed to certify these resolutions to the Credit Union and that the provisions thereof are in conformity with the Charter and Bylaws, Articles of Incorporation, Articles of Organization, Operating Agreement and/or Partnership Agreement of this Organization.

The Undersigned Organization certifies that its appropriate officers, employees, directors, partners, managers and/or member have read, understand and agree and the Undersigned Organization understands and agrees to (a) the terms and conditions appearing on the Resolution and Signature Authority; and (b) the terms and conditions of the depositors' membership agreement and disclosures and fee schedule (which were furnished separately and the receipt of which is hereby acknowledged).

**C. THIS SECTION IS ONLY FOR CORPORATIONS AND INCORPORATED ASSOCIATIONS.**

I, the undersigned, hereby certify to the Credit Union that I am the Secretary/Assistant Secretary of:

\_\_\_\_\_  
(Name of Business/Organiziation)

and that the Board of Directors of said Organization at a meeting at which a quorum was present adopted this Resolution and Signature Authority, and that such Resolution and Signature Authority is in full force and effect and has not been amended or rescinded.

In witness whereof, I have hereunto set my hand and the seal of the Corporation/Association

this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_  
Secretary's Signature

**D. THIS SECTION IS FOR PARTNERSHIPS, LIMITED PARTNERSHIPS, UNINCORPORATED ASSOCIATIONS, LIMITED LIABILITY COMPANIES (LLC & PLLC), AND SOLE PROPRIETORSHIPS.**

The following designated signatures are required to certify this authorization to be correct:

- Partnerships, Limited Partnerships and Limited Liability Partnerships (LLPs) require signatures of two Partners, unless there is only one General Partner, in which case the signature of the sole General Partner is required and is sufficient.
- Unincorporated Associations require two signatures. However, if the association does not have governing body/elected officers, it will require only one signature.
- Limited Liability Companies and Professional Limited Liability Companies (LLCs and PLLCs) require signatures of either two Members or two Managers, unless there is only one Manager, in which case the signature of the sole Manager is required and is sufficient. LLC and PLLC accounts also require a copy of the Articles of Organization attached to this form.
- Sole Proprietorships require the proprietor's (owner's) signature, and Assumed Name or similar legal certificate showing business name.

I (We) certify this Resolution and Signature Authority to be correct.

<i>Signature(s)</i>	<i>Title</i>	<i>Date</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signing this corporate resolution and signature authority form authorizes the Credit Union to run a credit check on the signers.

We appreciate your answers to the following question.

**REFERRAL DATA**

**How Did You Hear About the Credit Union?**

**Source**

**Identify by Name**

Friend/Family

\_\_\_\_\_

Conference

\_\_\_\_\_

Business Referral

\_\_\_\_\_

TV, Radio, Internet

\_\_\_\_\_

Mailing/Publication

\_\_\_\_\_

Other (specify)

\_\_\_\_\_

**Self-Help Federal Credit Union**  
301 W. Main Street, Durham 27701

Mailing Address:  
PO Box 3619, Durham, NC 27702-3619

Ph: 800-966-7353  
[www.self-help.org](http://www.self-help.org)

