

**MEMBERSHIP NUMBER (CU Use Only)**

Complete and sign this application and return with initial deposit to any NJFCU branch or mail to North Jersey Federal, 711 Union Blvd., Totowa, N.J. 07512. For required documentation, call our Member Service Department at 888-78-NJFCU or visit any branch.

<b>STEP 1 – BUSINESS TYPE</b>	<b>How did you hear about NJFCU?</b>
<p><b>(I am) (We are) applying for the following type of Commercial Membership (check one):</b></p> <p> <input type="checkbox"/> Sole Proprietorship                      <input type="checkbox"/> Limited Liability Company                      <input type="checkbox"/> Partnership GP LP (circle one)                      <input type="checkbox"/> Corporation  <input type="checkbox"/> Unincorporated Association/Organization                      <input type="checkbox"/> Club (Social/Recreational)                      <input type="checkbox"/> Estate                      <input type="checkbox"/> Trust         </p> <p><b>NOTE:</b> ALL owners/partners/stockholders/principals/executors/trustees must be established NJFCU Members. If not, then the business must apply to become a Select Employee Group (SEG) or the executors/trustees must become members at the time of this application.</p>	

<b>STEP 2 – CHOOSE ACCOUNT TYPE</b>	
<p><b>Indicate your initial deposit amount (s) and payment source:</b>   <input type="checkbox"/> Cash    <input type="checkbox"/> Check    <input type="checkbox"/> Wire or    <input type="checkbox"/> Transfer from Member #: _____</p> <p> <input type="checkbox"/> <b>Savings (Required)</b> - \$50 min    <input type="checkbox"/> Initial Deposit: \$ _____    <input type="checkbox"/> <b>Checking</b> - \$0 min    <input type="checkbox"/> Initial Deposit: \$ _____         </p>	

<b>STEP 3 – BUSINESS/ESTATE/TRUST INFORMATION</b>			
Name of Business (incl. Corp., Inc., LLC, etc.) Estate, Trust	Corporate Doing Business As (DBA) Name, when applicable	Employer Identification Number	Business Phone Number
Business Address: Street	City	State	Zip Code
Mailing Street Address (if different) (No P.O. Boxes)	City	State	Zip Code

<b>STEP 4 – OWNER / OFFICER / AUTHORIZED SIGNER / EXECUTOR / TRUSTEE INFORMATION (Circle one)</b>					
Name	Title	Percentage of Ownership _____ % (enter 0, if zero)	Social Security Number	Existing Member Number	Date of Birth
Home Address: Street			City	State	Zip Code
Home Phone Number	Work Phone Number	Mobile Phone Number	Email Address	Driver's License Number (including State)	

<b>STEP 4A – <u>ADDITIONAL</u> OWNER / OFFICER / AUTHORIZED SIGNER / EXECUTOR / TRUSTEE INFORMATION</b>					
Name	Title	If business, % of Ownership _____ % (enter 0, if zero)	Social Security Number	Existing Member Number	Date of Birth
Home Address: Street			City	State	Zip Code
Home Phone Number	Work Phone Number	Mobile Phone Number	Email Address	Driver's License Number (including State)	

<b>STEP 4B – <u>ADDITIONAL</u> OWNER / OFFICER / AUTHORIZED SIGNER / EXECUTOR / TRUSTEE INFORMATION</b>					
Name	Title	If business, % of Ownership _____ % (enter 0, if zero)	Social Security Number	Existing Member Number	Date of Birth
Home Address: Street			City	State	Zip Code
Home Phone Number	Work Phone Number	Mobile Phone Number	Email Address	Driver's License Number (including State)	

<b>STEP 4C – <u>ADDITIONAL</u> OWNER / OFFICER / AUTHORIZED SIGNER / EXECUTOR / TRUSTEE INFORMATION</b>					
Name	Title	If business, % of Ownership _____ % (enter 0, if zero)	Social Security Number	Existing Member Number	Date of Birth
Home Address: Street			City	State	Zip Code
Home Phone Number	Work Phone Number	Mobile Phone Number	Email Address	Driver's License Number (including State)	

**STEP 5 – Agreement**

By signing below, the legal entity referenced above (You) certifies that all of the information contained in this Application is accurate to the best of your knowledge. You acknowledge receipt of and agree to the terms and conditions of this Business Membership Application & Deposit Agreement, NJFCU's Truth-in-Savings Rate & Fee Schedule, Funds Availability Policy Disclosure, Electronic Fund Transfers Agreement and Disclosure (where applicable) and to any amendment NJFCU makes, which are incorporated herein. You agree to be bound to the terms and conditions of any account or service that you have with NJFCU now or in the future and agree that NJFCU may change those terms and conditions from time to time. In considering your request for any service, you authorize any person, association, corporation, firm, or personnel office to provide information concerning your affairs upon request of NJFCU, including the obtaining of credit reports. NJFCU may close your account(s) if you fail to comply with any state or federal law or regulation.

