



Attn: Financial Services
 PO Box 2205
 Austin, TX 78768-2205
 Phone: (512) 474-1955
 Fax: (512) 474-2731

MasterCard CheckCard and ATM Card Application

PECU Account # _____

Address correct on Symitar _____

Address updated in Symitar _____

Check all that apply:

I have only a savings account. (You will receive an ATM Card.)

I have a checking account. (you will receive a MasterCard Check Card that has all of the features of an ATM Card plus purchases can be made any place MasterCard is accepted. Purchases will be deducted directly from checking.)

I am requesting a card for the primary member. First _____

Last _____

Home Phone _____

Mobile Phone _____

Work Phone _____

I am requesting a card for the joint owner. First _____

First _____

Last _____

Home Phone _____

Mobile Phone _____

Work Phone _____

Account Address Information:

Address _____

City _____

State _____

Zip _____

Alternate Address Information

Check here if card is to be mailed to an alternate address. A \$15 fee will be assessed per card.

Check here if PIN is to be mailed to an alternate address. A \$15 fee will be assessed per PIN.

Address _____

City _____

State _____

Zip _____

Overdraft Privilege

Do you want Public Employees Credit Union to Authorize and pay Overdrafts on your everyday CheckCard and ATM card transactions?

Yes

No

For new accounts there is a 60 day waiting period to be eligible for ODP.

I/we agree to be bound by the terms in the MasterCard CheckCard, ATM Card and Electronic Services Agreement and Disclosure. I/we certify that I/we am/are at least 18 years old. My signature on this application certifies that the above statements are true and complete. I/we authorize the credit union to verify or check any of the information given, including employment and to obtain credit reports (including your spouse's if you live in a community property state). I/we authorize the credit union to disclose information on me/us and my/our account as permitted by law.

 Primary Member Signature

 Date

 Joint Owner Signature

 Date

Complete this application and send it WITH a copy of your current Driver's License or ID to the address above.

Branch or Financial Services Personnel Only

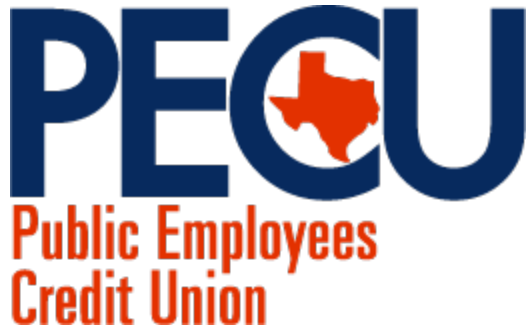
Received By _____ Date _____ Copy of current TDL or ID is attached or on file.

In Person

by Mail/Fax Signature Verified (If the address has changed in the last 90 days member should be contacted. _____)

Card Services Personnel Only

Card Ordered by _____ Date Ordered on Symitar _____ Card # 1 _____ Card #2 _____



OVERDRAFT PRIVILEGE DISCLOSURE

WHAT YOU NEED TO KNOW ABOUT OVERDRAFTS AND OVERDRAFT FEES

An overdraft occurs when you do not have enough money in your account to cover a transaction, but we pay it anyway. We can cover your overdrafts in two different ways:

1. We have standard overdraft practices that come with your account.
2. We also offer overdraft protection plans, such as a link to a savings account, which may be less expensive than our standard overdraft practices. To learn more, ask us about these plans.

This notice explains our standard overdraft practices.

➤ **What are the standard overdraft practices that come with my account?**

We do authorize and pay overdrafts for the following types of transactions:

- Checks and other transactions made using your checking account number
- Automatic bill payments

After August 15, 2010 we will not authorize and pay overdrafts for everyday debit card transactions unless you ask us to. If we do not authorize and pay an overdraft, your transaction will be declined.

We pay overdrafts at our discretion, which means we do not guarantee that we will always authorize and pay any type of transaction.

➤ **What fees will I be charged if Public Employees Credit Union pays my overdraft?**

Under our standard overdraft practices we will charge you a fee of up to \$30 each time we pay an overdraft