



e-Branch / PhoneStep Multiple Account Application

I (We) request the ability to access the following account number via PECU e-Branch and /or PhoneStep.

_____ **Full Access**

I (We) will be allowed to complete any share or loan transaction and have full access to the balances in each account between account # _____ and account # _____

_____ **Limited Access**

I (We) will have all powers listed in Full Access except for the following:

(Must be approved by a supervisor before access takes effect.)

Approval: _____

_____ **One Way Access**

I (We) will be allowed to transfer from:

Account # _____ Share ID _____

I (We) will be allowed to transfer to:

Account # _____ Share ID _____ Loan ID _____

_____ **Inquiry Access**

I (We), account # _____ will be allowed to access account # _____ and have inquiry privileges only.

I (We) authorize the access listed above by signing this authorization. If I (We) decide to cancel this authorization, I (We) must revoke it in writing and mail to: **PECU, Attn: Membership Dept., PO Box 2205, Austin, TX 78768-2205** or deliver it to any PECU branch office. I (We) understand that any revocation of authorization, will not be effective until the close of business on the day it is received.

Account Number

Primary Member Name

Primary Member Signature

Date

Account Number

Primary Member Name

Primary Member Signature

Date