



**BUSINESS MEMBERSHIP APPLICATION** (WITH OPTIONAL OVERDRAFT PROTECTION, LINE OF CREDIT, CREDIT CARD, AND/OR 24-HOUR ACCOUNT ACCESS)

**ACCOUNT APPLICATION** (FOR EXISTING BUSINESS MEMBERSHIP)

Complete and sign this application and return with your initial deposit to any Affinity branch or mail to Affinity FCU, P.O. Box 621, Basking Ridge, N.J. 07920. For required documentation see *Attachment* on pages 4 & 5; or for more information, call our Member Service Center at 800-325-0808 or visit any branch.

**Step 1 – Business Membership Status**

- Applying for a New Business Membership (go to Step 2)
- Existing Business Membership, applying for a secondary Business Membership (go to Step 2)
- Applying for an additional account under my/our current Business Membership #: \_\_\_\_\_ (go to Step 3)

**Step 2 – Business Type**

**(I am)(We are) applying for the following type of Affinity Business Membership (check one):**

- Sole Proprietorship
- LLC
- Partnership
- Corporation
- Unincorporated Association/Organization
- Club (Social / Recreational)

**NOTE:** ALL owners/partners/stockholders/principals must be established AFCU Members; otherwise, the business/association/organization/club must apply to become a Select Employee Group (SEG) at the time of this application.

**Step 3 – Choose Account Type(s) If a new/secondary membership, a Savings Account is required.**

Also indicate your initial deposit amount(s) and payment source:  Cash  Check or  Transfer from Member #: \_\_\_\_\_

- Savings-** \$5 minimum Initial Deposit: \$ \_\_\_\_\_
- Checking -** \$.01 minimum Initial Deposit: \$ \_\_\_\_\_
- Premium Plus -** \$100,000 minimum Initial Deposit: \$ \_\_\_\_\_
- Money Manager -** \$1,000 minimum Initial Deposit: \$ \_\_\_\_\_  
If your average monthly MM balance falls below \$1,000, there is a \$10 fee and your dividend rate drops to the current rate paid on regular savings accounts.

If your Premium Plus Account balance falls below \$100,000, your dividend rate drops to the current rate paid on regular savings accounts.

- Certificate(s) -** \$500 minimum

There is an early withdrawal penalty of 90 days interest for Certificates with a term of one year or less and a penalty of up to 182 days for early withdrawal of Certificate Accounts with terms of more than one year.

Initial Deposit:	Term:	Post Dividends:	Post Dividends to:
	3,6,7,9,12,15,18,30,60 months 60 - 1825 days	For terms <b>over</b> 1 year (365 days), dividends must be posted monthly	If not posted to Certificate (CA), Rate (APR) will apply, not Yield (APY).
\$ _____	____ Days <input type="checkbox"/> Months <input type="checkbox"/>	<input type="checkbox"/> Monthly <input type="checkbox"/> At Maturity	<input type="checkbox"/> CA <input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> MM <input type="checkbox"/> Premium
\$ _____	____ Days <input type="checkbox"/> Months <input type="checkbox"/>	<input type="checkbox"/> Monthly <input type="checkbox"/> At Maturity	<input type="checkbox"/> CA <input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> MM <input type="checkbox"/> Premium

**Step 4 – Enter Business/Association/Organization/Club Data**

Name of Business (incl. Corp., Inc., LLC, etc.), Association, Organization, or Club / Trade Name		Employee Identification Number	Business Phone Number	
Business Address: Street		City	State	Zip Code
Mailing Address (if different) : Street/PO Box		City	State	Zip Code

**Step 5 – Enter Owner/Partner/Principal/Authorized Representative of Business/Association/Organization/Club Data**

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)	Mother's Maiden Name

**Step 6 – Enter Owner/Partner/Principal/Authorized Representative of Business/Association/Organization/Club Data**

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)	Mother's Maiden Name

**Step 7 – Enter Owner/Partner/Principal/Authorized Representative of Business/Association/Organization/Club Data**

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)	Mother's Maiden Name

**Step 8 – Enter Owner/Partner/Principal/Authorized Representative of Business/Association/Organization/Club Data**

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)	Mother's Maiden Name

**Step 9 – Enter Owner/Partner/Principal/Authorized Representative of Business/Association/Organization/Club Data**

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)	Mother's Maiden Name

**★ COMPLETE STEPS 10 – 14 ONLY IF ESTABLISHING A NEW (OR SECONDARY) MEMBERSHIP; IF NOT, PLEASE OBTAIN AND COMPLETE APPLICABLE FORM FOR SERVICE**

**Step 10 – Choose additional Services for New/Secondary Memberships**

- \* **Overdraft Protection** (go to Step 10)       **24-Hour Account Access: Debit/ATM Card, Telephone and Internet Banking** (go to Step 12)
- \* **PrivateLine/Affinity Credit Card** (go to Step 11)       **Cross Member Transfer** (go to Step 13)
- \* Not available under a Club membership.       **I do not opt for any additional services at this time.**

**Step 11 – Overdraft Protection Options on Business Checking Account** (not available on a Club membership)

In the event you select option 3 or 4 below, please request and complete a LoanLiner® application. A PrivateLine and Affinity Credit Card are lines of credit, which if you are approved can be used to fund an overdraft in your checking account. However, Lines of Credit are not available on Association, Organization or Club Memberships; therefore Option 2 is the only ODP option available on those types of memberships.

Select Draw Order  If selecting more than one ODP option, please enter the draw order; that is, the account order in which you want us to take any available funds.

- Option 1:** No overdraft protection desired.
- Option 2:** Savings – Transfer to cover overdraft from savings account.
- Option 3:** PrivateLine – Advance to cover overdraft from PrivateLine (If choosing this option, also complete Step 11)
- Option 4:** Affinity Credit Card – Advance to cover overdraft from  VISA or  MasterCard (If choosing this option, also complete Step 11)

**Note:** Advances on this credit line will count as a cash advance; interest will begin to accrue the date of the advance, until the loan balance is zero.

**Step 12 – PrivateLine and/or Affinity Credit Card** (not available on a Club membership)

Check here  if applying for a **PrivateLine** Credit Limit requested: \$ \_\_\_\_\_

Choose the Credit Card you are applying for:  **VISA**  **MasterCard** Credit Limit requested: \$ \_\_\_\_\_

Annual Salary of Person in Step 5: \$ \_\_\_\_\_ Annual Salary of Person in Step 6: \$ \_\_\_\_\_

Annual Salary of Person in Step 7: \$ \_\_\_\_\_ Annual Salary of Person in Step 8: \$ \_\_\_\_\_

**Step 13 – 24-Hour Account Access**

**Affinity OneCard or ATM Card:** A Debit card requires an Affinity Checking Account; otherwise, an ATM card will be issued.

**AUDREY (Telephone) and Internet Home Banking:** Enables you to access accounts and process transactions via the telephone or the internet.

Enter a 4-digit Personal Identification Number (PIN).

Select a PIN easy for you to recall, but difficult for others to determine.

**Step 14 – Cross Member Transfers**

Cross Member Transfer allows you to transfer funds via AUDREY or Internet Home Banking from this business membership to another Membership. To use this feature, both the sender and the receiver of funds must be enrolled in AUDREY. If you elect this feature, enter the member name(s) and membership number(s) you would like to transfer to:

Member Name	Membership Number	Member Name	Membership Number

**Note:** If you want to be able to transfer funds into this business membership from another membership, the owner(s) of that membership must request and complete a *Cross Member Transfer Authorization* form.

**Step 15 – Signatures**

**MEMBERSHIP** – I (meaning all signors of this application) hereby make application in the Credit Union and certify that all of the information contained in this Application is accurate to the best of my knowledge. **ACCOUNTS** – I am applying for the accounts available through this application. I have received and agreed to the Account Agreement's Rules and Regulations of the accounts applied. I also received the Truth-in-Savings Disclosure with Rates and the Schedule of Fees applicable to these accounts. **PRIVATELINE, AFFINITY CREDIT CARDS AND CHECKING ACCOUNT OVERDRAFT PROTECTION OPTIONS** – If I selected the PrivateLine or an Affinity Credit Card as set forth in Step 11 & 12 above, by signing below, I acknowledge receiving a copy of the LoanLiner Credit Agreement, which includes the Truth-in-Lending Disclosures, and the LoanLiner Addendum, which includes the Billing Rights Notice. I further acknowledge and agree that I have fully read and understand all of the terms of these documents, and I agree to be bound by all of the terms and provisions. By signing below, I affirm that as a condition of receiving a PrivateLine and/or Credit Card Account from the Credit Union, I give the Credit Union a security interest in all present and future shares I have on deposit with the Credit Union. I authorize Affinity to apply the balance in these account(s) to pay any amounts due under this agreement should I default. I authorize the Credit Union to obtain information credit worthiness from consumer reporting agencies, now and in connection with updates, renewals, and later extensions. **24-HOUR ACCOUNT ACCESS OPTIONS** – If I selected the Affinity OneCard option as set forth in Step 13 above, I understand the Affinity OneCard transactions will be withdrawn from my Affinity Checking Account and all eligible accounts will be linked to it, which can be accessed by the Affinity OneCard. If I do not qualify for an Affinity OneCard, I understand Affinity will process this same application to determine my eligibility for an Affinity ATM Card in its place. I agree to be bound by the terms and conditions of the 24-Hour Account Access and Electronic Funds Transfer Agreement and Disclosure and acknowledge receipt of said disclosures. **MISCELLANEOUS** – Affinity reserves the right to issue these accounts and services to qualified members and to withdraw or change any of the terms and provisions at any time. Affinity Federal Credit Union is hereby authorized to recognize any of the signatures subscribed hereto in the payments of funds or the transaction of business for this account.

I certify under penalty of perjury that (1) the Social Security or Taxpayer Identification Number provided on this application is correct, (2) the IRS has never notified me that I am subject to 28% backup withholding, or has never notified me that I am no longer subject to such backup withholding, and (3) I am a US Person (including a U.S. resident alien). **NOTE:** If part (2) of this sentence is not true in your case, please strike out and initial before signing.

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

X \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_  
 Owner/Partner/Principal/Officer Signature (Step 5)      Owner/Partner/Principal/Officer Signature (Step 7)      Owner/Partner/Principal/Officer Signature (Step 9)

X \_\_\_\_\_ X \_\_\_\_\_  
 Owner/Partner/Principal/Officer Signature (Step 6)      Owner/Partner/Principal/Officer Signature (Step 8)

**For Credit Union Use Only**

Member # (including suffix)	Date	Branch		SDC#	Employee's Full Name
Individual ID (Step 5) Verified <input type="checkbox"/> ID Type:	ID# (include State/County/Country)	Year SS# Issued	State SS# Issued	ChexSystems Comments	BridgerInsight Comments
Individual ID (Step 6) Verified <input type="checkbox"/> ID Type:	ID# (include State/County/Country)	Year SS# Issued	State SS# Issued	ChexSystems Comments	BridgerInsight Comments
Individual ID (Step 7) Verified <input type="checkbox"/> ID Type:	ID# (include State/County/Country)	Year SS# Issued	State SS# Issued	ChexSystems Comments	BridgerInsight Comments
Individual ID (Step 8) Verified <input type="checkbox"/> ID Type:	ID# (include State/County/Country)	Year SS# Issued	State SS# Issued	ChexSystems Comments	BridgerInsight Comments
Individual ID (Step 9) Verified <input type="checkbox"/> ID Type:	ID# (include State/County/Country)	Year SS# Issued	State SS# Issued	ChexSystems Comments	BridgerInsight Comments

**REQUIRED DOCUMENTATION FOR BUSINESS MEMBERSHIP**

• **IDENTIFICATION VERIFICATION FOR ANY INDIVIDUAL WHO WILL SIGN ON BEHALF OF THE BUSINESS, INCLUDING: OWNERS, PARTNERS, PRINCIPALS, OFFICERS AND ANY OTHER AUTHORIZED REPRESENTATIVE**

- If a US Citizen, one (1) valid form of the following government-issued ID with photo:
  - Driver's License
  - Passport
  - Military ID Card
  - County/State ID Card
- If a US Permanent Resident, all of the following valid government issued ID:
  - US Permanent Resident Card (Green Card)
  - Social Security Card
  - Valid Driver's License with photo (or passport)
- If a Resident Foreign National, all of the following:
  - United States Visa
  - Passport
  - Social Security Card *OR* proof of **issued** Individual Tax Identification Number (ITIN)
- Proof of address if (current address) not listed on the ID above

• **TAX IDENTIFICATION NUMBER (TIN)**

- Employee Identification Number (EIN), which you can obtain via the IRS as follows:
  - Online at [www.irs.gov/businesses/small/article/0,,id=98350,00.html](http://www.irs.gov/businesses/small/article/0,,id=98350,00.html), or
  - By calling 1-800-829-4933
- It is recommended you obtain an EIN for your business membership; however, Affinity can accept your personal Social Security Number (SSN) in the following cases:
  - Sole Proprietorship, for example: John Smith DBA Smith's Auto Repair
  - Limited Liability Company with only one (1) owner/member, for example: John Smith, Smith's Auto Repair, LLC
  - Social or Recreational Club, for example: John Smith DBA Smith's Auto Repair Bowling Team
  - Political campaigns using the candidate's SSN, for example: John Smith DBA John Smith Campaign Fund. However, if established by a political committee, it must use an EIN, e.g. Committee to Elect John Smith.

• **BUSINESS VERIFICATION**

Depending on the type of business you operate, you will need to take one or two steps for your business to be properly registered. For assistance forming/registering your business in New Jersey, refer to *NJ Business Gateway Registry Services* online at: <http://www.state.nj.us/njbgs/> or *NJ – Taking Care of Business* online at: <http://www.nj.gov/njbusiness/>

▪ **SOLE PROPRIETORSHIP:**

- Certificate of Trade Name registered with your County Clerk's Office  
**Note:** If the business name uses your name, e.g. John Smith Graphics, registration is advisable. If the business name does not use your name, e.g. Custom Graphics, you must register the name with the clerk of the county where the business is located. Registration of your trade name generally protects your trade name from use by any other business in the county.
- Federal Notice providing Employee Identification Number (EIN), unless using your personal TIN
- Affinity Business Membership Application
- Affinity's Certified Resolution for Depository Authorization
- Affinity's Business Profile Worksheet

▪ **LIMITED LIABILITY COMPANY (LLC):**

- Certificate of Incorporation/Formation (aka Articles of Organization) filed and certified with the State in which it was formed
- LLC Operating Agreement filed and certified with the State in which it was formed IF the Certificate of Incorporation/Formation does not contain who the owners, officers, principals, etc are and what their authority is
- Federal Notice providing Employee Identification Number (EIN), unless one (1) member/owner LLC using personal TIN
- Affinity Business Membership Application
- Affinity's Certified Resolution for Depository Authorization
- Affinity's Business Profile Worksheet

## REQUIRED DOCUMENTATION FOR BUSINESS MEMBERSHIP (continued)

- **PARTNERSHIP:**
  - Partnership Agreement (aka Affidavit of Partnership)
  - Federal Notice providing your Employee Identification Number (EIN)
  - Affinity Business Membership Application
  - Affinity's Certified Resolution for Depository Authorization
  - Affinity's Business Profile Worksheet
- **CORPORATION:**
  - Articles of Incorporation (aka Certificate of Incorporation or Corporate Charter) filed and certified with the State in which it was formed
  - Corporate Resolution and/or Operating Agreement
  - Federal Notice providing your Employee Identification Number (EIN)
  - *Any Corporation having **non-profit status***, must also provide the following along with the required forms stated above:
    - Not for Profit Certificate of Incorporation
    - Tax Exempt Form 501[C]
  - Affinity Business Membership Application
  - Affinity's Certified Resolution for Depository Authorization
  - Affinity's Business Profile Worksheet
- **UNINCORPORATED ASSOCIATION OR ORGANIZATION; e.g. RELIGIOUS, CHARITABLE, POLITICAL, FUNDRAISING, EDUCATIONAL OR TAX EXEMPT**
  - Association/Organization Resolution and/or Operating Agreement filed and certified by the County or State
  - By-Laws
  - Federal Notice providing your Employee Identification Number (EIN)
  - *Any unincorporated Association or Organization having **non-profit status***, must also provide the following along with the required forms stated above:
    - Not for Profit Certificate of Incorporation
    - Tax Exempt Form 501[C]
  - Affinity Business Membership Application
  - Affinity's Certified Resolution for Depository Authorization
  - Affinity's Business Profile Worksheet
- **SOCIAL OR RECREATIONAL CLUB; e.g. BOWLING LEAGUE, BIRTHDAY CLUB, ETC.:**
  - Meeting minutes authorizing the account and assigning transaction authority
  - Federal Notice providing Employee Identification Number (EIN), *unless using personal TIN*
  - Affinity Business Membership Application
  - Affinity's Certified Resolution for Depository Authorization
  - Affinity's Business Profile Worksheet