

Estate Account Application & Update Form



IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. **What this means for You:** When you open an account, we will ask you for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

An estate account may be opened by a qualified administrator of the Estate such as the executor. To open the Estate Account we will need:

1. An original copy of (1) the decedent's death certificate and (2) Letters of Administration or Testamentary
2. A copy of a government or state issued photo ID for the executor(s)

Please mail the application with copies of valid photo identification (such as driver's license) and required documentation to Northwest Federal Credit Union, Attention: Deposit Administration, P.O. Box 1229 Herndon, VA 20172-1229, or fax to 703-925-5113.

A: ACCOUNT INFORMATION (Please print)

- New Account** **Account Update(s) Requested** (select all that apply)
 Change of Address Open Additional Products/Services (Complete Section E)

In accordance with the provisions of the Letters of Administration or Testamentary, I hereby establish this account in order to administer the Estate of

_____, who was _____ (relationship to me).

B: ESTATE ACCOUNT

| | | | | | |
|--------------------------------|--|------|---|----------|--|
| Name of Estate Account | | | Employer Identification Number (EIN) for the Estate Account | | |
| Mailing Address for the Estate | | City | State | ZIP Code | |

C: ADMINISTRATOR/EXECUTOR(S)

| | | | | | |
|---|--|------------------------------|---|--|---------------------------------|
| ADMINISTRATOR/EXECUTOR #1 Name (First, MI, Last) | | | Social Security Number (Tax Identification Number, if applicable) | | Birthdate (MM/DD/YYYY) |
| Residential Address (REQUIRED if different than Mailing Address for the Estate) | | City | State | ZIP Code | |
| Home Phone Number | Work Phone Number | Mobile Phone Number* | | Email Address | |
| Full Driver's License or State ID Card Number | State | Other Form of Identification | | ID Issue Date (MM/DD/YYYY) | ID Expiration Date (MM/DD/YYYY) |
| Approximate Annual Income \$ | Source of Deposits, if Other than Payroll (i.e., pension, Social Security) | | | I am a: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non Resident Alien | |

How will you use this account? (i.e., savings, primary expenses)

| | |
|---|--|
| Do you plan to use your account to conduct international transactions such as incoming or outgoing international wires or receive international ACH credits? <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you or any member of your family a public official? (Person(s) who are or have been entrusted with prominent public functions, i.e., heads of government, senior politicians, senior government, judicial or military officials) <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|--|

| | | | | | |
|---|--|------------------------------|---|--|---------------------------------|
| ADMINISTRATOR/EXECUTOR #2 Name (First, MI, Last) | | | Social Security Number (Tax Identification Number, if applicable) | | Birthdate (MM/DD/YYYY) |
| Residential Address (REQUIRED if different than Mailing Address for the Estate) | | City | State | ZIP Code | |
| Home Phone Number | Work Phone Number | Mobile Phone Number* | | Email Address | |
| Full Driver's License or State ID Card Number | State | Other Form of Identification | | ID Issue Date (MM/DD/YYYY) | ID Expiration Date (MM/DD/YYYY) |
| Approximate Annual Income \$ | Source of Deposits, if Other than Payroll (i.e., pension, Social Security) | | | I am a: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non Resident Alien | |

How will you use this account? (i.e., savings, primary expenses)

| | |
|---|--|
| Do you plan to use your account to conduct international transactions such as incoming or outgoing international wires or receive international ACH credits? <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you or any member of your family a public official? (Person(s) who are or have been entrusted with prominent public functions, i.e., heads of government, senior politicians, senior government, judicial or military officials) <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|--|

*If you provide a mobile phone number, Northwest has your permission to place calls or text messages, including autodialed and prerecorded message calls, to that number. Message and data rates may apply.

D: DECEDENT

| | | | |
|------------------------|--|------------------------|----------------------------|
| Name (First, MI, Last) | Social Security Number (Tax Identification Number) | Birthdate (MM/DD/YYYY) | Date of Death (MM/DD/YYYY) |
|------------------------|--|------------------------|----------------------------|

E: PRODUCTS/SERVICES DESIRED – Choose your Northwest products and services by checking the appropriate boxes.

| | | |
|---|--|--|
| <input type="checkbox"/> Primary Savings Account REQUIRED for membership, with a \$1.00 minimum deposit | Overdraft Protection Select draw account(s) to be used as overdraft source(s) <ul style="list-style-type: none"> <input type="checkbox"/> Primary Savings Account <input type="checkbox"/> Rewards Savings <input type="checkbox"/> Secondary Savings Account <input type="checkbox"/> Money Market Account | <input type="checkbox"/> Online Banking |
| <input type="checkbox"/> Checking Account <ul style="list-style-type: none"> <input type="checkbox"/> Dividend Rewards Checking (<input type="checkbox"/> with Rewards Savings) <input type="checkbox"/> Debit Rewards Checking (<input type="checkbox"/> with Rewards Savings) <input type="checkbox"/> Choice Checking <input type="checkbox"/> Elite Checking | Member Protection Plan (MPP) <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Limited MPP (Comes with eligible accounts, form required to opt out) <input type="checkbox"/> Standard MPP (Opt in form is required) <p>If Member Protection Plan is selected, it will be the last overdraft source. Fees apply.</p> | <input type="checkbox"/> Free Starter Checks for Estate Account |
| | | <input type="checkbox"/> Estate Account Checks (Fees apply) I would like to order one box of Estate Account Checks. Checks will be printed in the same manner as the account has been titled. |

F: SOCIAL SECURITY NUMBER/TAX IDENTIFICATION NUMBER – Certification and backup withholding information

Under penalties of perjury, I certify that: (1) the Social Security Number (SSN)/Taxpayer Identification Number (TIN) listed above is my correct taxpayer identification number (or I am waiting for one to be issued); and (2) I am not subject to backup withholding because (a) I am exempt, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) because the IRS has notified me that I am no longer subject to backup withholding; and (3) I am a U.S. citizen or other U.S. person. For federal tax purposes, you are considered a U.S. person if you are: an individual who is a U.S. citizen or U.S. resident alien; a partnership, corporation, company, or association created or organized in the United States or under the laws of the United States; an estate (other than a foreign estate); or a domestic trust (as defined in Regulations section 301.7701-7). I hereby grant Northwest a security interest in all shares and dividends on deposit, now and hereafter, in all accounts I own (including joint accounts) to secure any and all of my indebtedness or obligations to Northwest (except loans secured by real estate), now and hereafter, including debts incurred by credit card. Funds in my Individual Retirement Account are excluded from this security interest. Northwest may enforce this security interest without prior notice.

| | |
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| <input type="checkbox"/> I am subject to backup withholding. Instructions: Certification (2) above does not apply if this box is checked. You must check this box if You have been notified by the IRS that you are currently subject to backup withholding because You have failed to report all interest and dividends on Your tax return. | <input type="checkbox"/> I am not a U.S. citizen or resident alien (including green card holder); for income tax purposes I must complete a W-8BEN. Instructions: The certification paragraph above does not apply if this box is checked. You must provide a completed IRS form W-8BEN if this box is checked. |
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G: SIGNATURE(S) – Please include a clear copy of photo ID.

I/We hereby certify eligibility for membership and make application for membership in and agree to be bound by and conform to the by-laws, rules, regulations and policies now in effect and as amended or adopted in the future by Northwest. I/We authorize Northwest to obtain a consumer credit report in establishing this account or other related financial services as submitted now or in the future. By signing below, I/we certify that all the information on this Application is true and correct under penalty of perjury and agree to acknowledge receipt of the account agreements and disclosures, including but not limited to the "Account Agreement," "Electronic Services Agreement and Disclosure" and "Wire Transfer Agreement."

By signing below, you, the person establishing the account, the primary member, account owner and each authorized signer, (collectively "You"), acknowledge and agree that the information provided is accurate, complete and true and that you have instructed Northwest as to the proper title of the account and we may rely on the information in our dealing with you, now and in the future; You certify that You, by court order or otherwise are authorized to request and cause the changes to be implemented, sign up for the additional products and services with Northwest, and to take all other actions and steps reasonable or necessary to do so, and deliver any instruments, or agreements as necessary to Northwest. Any action hereto taken by You is hereby ratified and confirmed by the estate which is the account owner. Unless or until Northwest is given written notice otherwise, any one of the undersigned shall have full power and authority to act on behalf of the estate. It shall not be necessary for Northwest to inquire further into the powers of the executor, administrator or agent purporting to act on behalf of the estate.

By signing below, you understand that if you choose to have access to Online Banking and Remote Services you will have simultaneous access to any of your personal accounts and the fiduciary account on which you are an authorized signer, and Northwest shall have no liability for your transactions resulting in commingling of funds. To the fullest extent allowed by law, You, individually and on behalf of the estate, as its representative, agree to hold Northwest harmless and to indemnify it from any and all damages, claims or losses, including incurred attorney's fees, related to, directly or indirectly, the established estate.

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

| | |
|---|------|
| Administrator/Executor #1 Signature X | Date |
| Administrator/Executor #2 Signature X | Date |

CREDIT UNION USE ONLY

| | | | | |
|--------------------------|--|---------------|----------------|----------------------|
| Date Submitted | Submitted Via: <input type="checkbox"/> Mail <input type="checkbox"/> Branch <input type="checkbox"/> Fax | Date Accepted | Account Number | X-Ref Account Number |
| Northwest Representative | | | | Date |