



Checking Account Application (Share Draft)

Member Account Number _____	DOB _____
Name (1) _____	
Name (2) _____	
Street Address _____	
City, State, Zip _____	

Overdraft Protection Authorization
Should an overdraft occur in my/our Checking (Share Draft) Account, I/We authorize you to transfer funds from my/our _____ Account. I understand that if I am approved for an Overdraft Protection Line of Credit Loan all advances will come from my/our line of credit first.
<input type="checkbox"/> Accept <input type="checkbox"/> Decline
x _____ x _____

This change hereby supercedes all previous designations: (Date) _____
<input type="checkbox"/> Joint Owner Change <input type="checkbox"/> Taxpayer ID Change <input type="checkbox"/> Name Change

Name #1 - Owner Identification

Social Security Number _____

Employer Information _____

Driver's License: (State) _____ (Number) _____

Name #2 - Joint Owner Identification

Social Security Number _____

Employer Information _____

Driver's License: (State) _____ (Number) _____

For Office Use:
S/D# _____
Initial Deposit (Min. \$25.00) _____
Date Opened _____ Opened By _____
Date Closed _____ Reason _____

Share Draft Agreement

I/We hereby authorize NJ Gateway Federal Credit Union (the Credit Union) to establish this Checking (Share Draft) Account for me/us. The Credit Union is authorized to pay checks (share drafts) signed by me (or by any of us) and to charge such payments against this Account. It is further agreed that:

1. Only checks (share draft blanks) and other methods approved by the Credit Union may be used to make withdrawals from this Account.
2. All non-cash payments to this Account will be credited subject to collection.
3. The Credit Union is under no obligation to pay a check (share draft) on which the date is more than six months old.
4. The Credit Union is under no obligation to pay a check (share draft) that exceeds the fully paid and collected balance in this Account: the Credit Union may, however, pay such check(s) (share draft(s)) and transfer funds to this Account in the amount of the resulting overdraft, plus a service charge, from any other regular account from which any of the undersigned is then eligible to withdraw funds. No more than six transfers of this type per month may be made.
5. The Credit Union may pay a check (share draft) on whatever day it is presented for payment, notwithstanding the date (or any limitation on the time of payment) appearing on the check (share draft).
6. When paid, checks (share drafts) become the property of the Credit Union and will not be returned, either with the periodic statement of this Account or otherwise.
7. Except for gross negligence, the Credit Union is not liable for any action it takes regarding the payment or nonpayment of a checking (share draft) Account.
8. Any objection with respect to any item shown on a periodic statement of this Account is waived unless made in writing to the Credit Union before the end of 30 days after the statement is mailed.
9. This Account is subject to the Credit Union's right to require advance notice of withdrawal as provided in its bylaws.
10. This Account is also subject to other terms, conditions and service charges as the Credit Union may establish from time to time.
11. This Account may not be used as collateral security for a loan. Any funds desired as security must be transferred to a regular or other special savings (share) Account.
12. You agree to notify the Credit Union immediately if any check (draft) is lost or stolen.
13. Any unused checks (drafts) will be returned to the Credit Union upon closing this Account, if so requested by the Credit Union.
14. In the event of a negative balance in the checking (share draft) Account, the Credit Union reserves the right to debit any other Account from which the signer(s) of this agreement is/are entitled to withdraw funds. If the balance remains unpaid for more than 30 days, you agree to repay the amount of the negative balance and actual collection cost and reasonable attorney's fees.
15. If this Agreement is signed by more than one person, the persons signing below shall be the joint owners of this Account which, in that event, shall be subject to the additional terms and conditions **printed below**.

Supplementary Agreement/Joint Account with Right of Survivorship

1. This Account is subject to the New Jersey Multiple-Party Deposit Account (N.J.S. 17:161-1 ET esq.), the Bylaws of the Credit Union and all applicable State and Federal laws and regulations. The Credit Union is hereby authorized to recognize any of the signatures subscribed below in payment of funds or the transaction of any business from this account.
2. When a party to the Account dies and there is one surviving party, that party shall own the entire Account. If there are two or more surviving parties, each survivor will own his/her net contributions plus an equal share for each survivor of the deceased party's share.
3. The Credit Union shall not be liable for any payments made from this Account according to the New Jersey Multiple-Party Deposit Account Act.
4. The rights of the Credit Union under this agreement shall not be changed or terminated by said owners, or any one of them except by written notice to the Credit Union which shall not affect transactions made prior to such notice.
5. Each party to this Account acknowledges having read this Supplementary Agreement and agrees to be bound by its terms and any future changes thereto.

Member Signature/Date _____

Member Signature/Date _____