☐ NEW ACCOUNT		
☐ ADD/DELETE OFFICERS	Acct #	



		,	ount Application	~ Agrooment				
Organization/DBA Name					Date			
Account #	Sole F	Proprietorship [Unincorporated Association					
Account Type: Savings ATM Care	d for: (Please specify Signer #)		☐ Checking ☐ Check Card for: (Plea	ase specify Signer #)	☐ Money Market			
In this agreement, the words and "credit union" refer to Sk	yOne Federal Credit U		anization," refer to the busi	ness owners or signers	s on this account; "we," "us			
Organization/Owner Inform	nation							
Complete Organization/Owner Nam	e (Please print)		Employer ID Number (TIN)					
Principal Organization/Owner Addre	SS (Street address required,	no P.O. Box)	City	State	Zip			
Organization/Owner Address (If differ	erent)		City	State	Zip			
Work Phone	Work Fax)	Contact Pe	erson				
Email Address		We	ebsite		/ / / Date Business Established			
Organization/Owner Signe	r #1 Information							
Organization/Owner #1 Name (Plea	se print)			Social Security #				
Home Address (Street address requ	uired, no P.O. Box)		City	State	Zip			
Organization/Owner Address (If diffe	erent)		City		Zip			
() Home Phone	(Work Phone)	Email Add	ress				
Driver License #	State Da	/ / ate of Birth	Security Code for your protect	ion (word, numbers or phrase to id	dentify you when calling the Credit Union)			
Organization/Owner Signe			, , , , , , , , , , , , , , , , , , , ,					
Organization/Owner #1 Name (Please	ation/Owner #1 Name (Please print)		Social Security #					
Home Address (Street address requ	uired, no P.O. Box)		City	State	Zip			
Organization/Owner Address (If diffe	erent)		City	State	Zip			
() Home Phone	(Work Phone)	Email Add	ress				
Driver License #	,	/ / / ate of Birth						
		ate of birth	Security Code for your protect	lon (word, numbers or phrase to id	dentify you when calling the Credit Union)			
Organization/Owner Signe	r #3 information							
Organization/Owner #1 Name (Please print)			Social Security #					
Home Address (Street address requ	uired, no P.O. Box)		City	State	Zip			
Organization/Owner Address (If different Address)	erent)		City	State	Zip			
() Home Phone	(Work Phone)	Email Add	ress				
	State Da	/ / ate of Birth	Security Code for your protect	ion (word, numbers or phrase to ic	dentify you when calling the Credit Union)			

rganization/Owner Sig	mer #4 mormation	1				
Organization/Owner #1 Name (<i>Please print</i>)				Social Secu	urity #	
Home Address (Street address	required, no P.O. Box)		City		State	Zip
Organization/Owner Address (If	different)		City		State	Zip
) Home Phone	() Phone	F-0	nail Address		
nome Phone	VVOIK	/ / /		iaii Address		
Oriver License #	State	Date of Birth	Security Code for you	ur protection (word, numbers or	phrase to ide	ntify you when calling the Credit Unio
		Required [Documentatio	n		
Unincorporated As	ssociation Accou	ınt				
☐ For NATCA only:	NATCA Local Upda	ate Worksheet.				
☐ Copy of constitut	tion (or article of ass	ociation), bylaws, or c	other charter docume	nts created upon for	mation.	
Copy of filed fiction	tious name stateme	nt, if any.				
☐ Resolution of the	governing board or	committee to open a	and transact business	on an account and I	naming a	uthorized signors.
☐ Copy of IRS Tax	Identification Number	er.				
Sole Proprietorship	a Account					
		ng all business owner	70.			
_		ent showing all busine				
_	ith the name of the b		oo owners.			
Badii idda dara Wi						
	A	Acceptance of	f Business Ag	reement		
By signing below, the C Agreement and the und Schedule of Service Ch this reference incorpora information given on the	lersigned acknowled arges. All the terms, ted in their entirety i	dge receipt of a copy of a copy of conditions and inform	of the Credit Union's mation contained in the	current Rates, All-in- nis Agreement and ar	One Acco	ount Disclosure and ments thereto are by
Owner/Signer #1 Signatur	e				Da	te
Owner/Signer #2 Signatur	е				Da	te
Owner/Signer #3 Signatur	e				Da	te
Owner/Signer #4 Signatur	e				Da	te
CREDIT UNION USE ON	LY					
Account #:			Pate Received:	Date (Opened/Ch	nanged:
Name:		N	Membership Officer:			
Details of Change:			Supervisor or Auditor Ap	proval: X		
			. Sp. St. Noor St. Addition Ap	J-: 3.00		

Organization/DBA Account Warranties and Certifications

Sole Proprietorship Accounts

If the account is in the name of a sole proprietorship, the person whose signature appears as Owner/Signer #1 on this Agreement represents and warrants that the Business is an unincorporated business owned wholly and exclusively by such person and agrees that SkyOne Federal Credit Union is authorized to act upon the instructions of such person. The Owner agrees to inform SkyOne Federal Credit Union in writing promptly of any changes in the organizational status of the Business. Furthermore, Owner/Signer #1 will update the fictitious business name statement on file in the county clerk's office in each county annually.

Unincorporated Association

If the account is in the name of an unincorporated association, the Signers represent, warrant and agree that all items and funds deposited into this Account belong to the unincorporated association, that each of them has been duly authorized by the unincorporated association and has the power and authority to act, sign and bind the unincorporated association, that SkyOne Federal Credit Union may rely on such authority until proper written notice of revocation is received by SkyOne Federal Credit Union and that no dissolution of unincorporated association has occurred. Furthermore, the authorized signers will update the fictitious name statement on file in all places, as required by law in which the unincorporated association conducts business. Unincorporated association accounts are not subject to the Multiple Party Accounts Law.

Additional Terms and Conditions

- 1. Funds deposited to the account(s) may be unavailable for withdrawal until collected.
- 2. Charges for maintenance and service of the account(s) may be made on occasions and in amounts set forth in rules heretofore and hereafter adopted by SkyOne Federal Credit Union. Such charges may be made by SkyOne Federal Credit Union whether an account is active or dormant. All charges may be deducted from an account, and SkyOne Federal Credit Union shall not be liable for dishonoring items when the deduction of such charges results in there being insufficient funds in the account to honor items presented thereafter.
- 3. SkyOne Federal Credit Union is authorized to waive presentment, notice of dishonor, and protest as to all checks, drafts, notes, certificates, acceptances, and other items (hereafter singly and collectively "items") purchased or received by SkyOne Federal Credit Union for deposit or collection.
- 4. SkyOne Federal Credit Union is authorized, but not obligated, to honor any item drawn on the account where the signature thereon does not correspond exactly with the specimen authorized signature furnished herein.
- 5. SkyOne Federal Credit Union may refuse payment of and return as unpaid to the presenting party any or all items drawn on this account and presented to SkyOne Federal Credit Union on any business day when, at the opening of business on that day, there is not a sufficient balance of collected funds in this account to pay the total amount of such items.
- 6. SkyOne Federal Credit Union is authorized and directed to send an e-statement notification by email to the current email address on file, at the close of each accounting period for this account (as determined by SkyOne Federal Credit Union from time to time) making e-statements available online through our online banking service thereof for the preceding account statement period. Such e-statement will be sent within five business days after the last day of the accounting period. Business is obligated to examine the same immediately and to report promptly to SkyOne Federal Credit Union any dispute or difference of account for whatever reason. Unless SkyOne Federal Credit Union receives written notice of any claimed dispute or difference of account within 60 days after the e-statement and items shall have been sent or made available to Business, Business shall be precluded from asserting any dispute or difference as to the account as rendered.
- 7. SkyOne Federal Credit Union may close this account at any time by sending the balance of funds therein to Business, and SkyOne Federal Credit Union shall not be liable for dishonoring any item drawn on this account and presented for payment after such remittance or termination. SkyOne Federal Credit Union may decline to collect any item or items deposited in this account after giving such notice by sending such items to Business before SkyOne Federal Credit Union's midnight deadline thereon.
- 8. Should SkyOne Federal Credit Union receive any process, summons, order, injunction, execution, distraint, levy, lien, or notice (hereafter called Process), which in SkyOne Federal Credit Union's opinion affects this account, SkyOne Federal Credit Union may, at its option and without liability, thereupon refuse to honor orders to pay or withdraw sums from this account and may either hold the balance herein until Process is disposed of to SkyOne Federal Credit Union's satisfaction, or pay the balance over to the source of the Process.
- 9. To secure any and all indebtedness and liability of Business to SkyOne Federal Credit Union, however and whenever incurred or evidenced, whether direct or indirect, absolute or contingent, due, or to become due, Business hereby transfers and conveys to SkyOne Federal Credit Union all balances, credits, deposits, monies, and items now or hereafter in this account and SkyOne Federal Credit Union is authorized at any time to charge or set off such indebtedness or liability against this account, whether or not the same is then due, and SkyOne Federal Credit Union shall not be liable for dishonoring items where the making of such a charge or charges results in there being insufficient funds in Business' account to honor such items.
- 10. All remittances, statements, items, notices, and other communications and writings given by SkyOne Federal Credit Union to Business in connection with this account shall be deemed given when sent to Business's address on page 1 of this application or to such other address as shall have been designated to SkyOne Federal Credit Union in a written statement.
- 11. This Agreement will be governed by California Law. Any action or proceeding by Business to enforce an obligation, duty or right arising under this Agreement or by law with respect to this Account must be commenced within one year after the cause of action accrues. If any of the provisions of this Agreement are determined to be void or invalid, the remainder of the Agreement shall remain in full force and effect. SkyOne Federal Credit Union may change the terms of this Agreement by delivering a notice in the account statement or by written amendment to this Agreement. Unless otherwise required by law, we may amend this Agreement without prior notice.