

MANCHESTER MUNICIPAL FEDERAL CREDIT UNION "People helping people Since 1960"

Remote Deposit Capture Application

Name:				
Joint Name:				
Address:				
🗆 Rent 🗆 Own How Long:		Hm Phone:		
		Cell Phone:		
Email:		Social Security #:		
Any Overdrafts in the Last 6 months?		🗆 Yes 🗆 No		
		If Yes, How many:		
Online User Nar	ne:	Account #:		

AUTHORIZATION TO OBTAIN AND VERIFY INFORMATION:

I certify that the information provided is true and herby grant the Credit Union authorization to obtain and evaluate any security, credit and payment information they deem necessary to evaluate myself or co-applicant for security risk or creditworthiness, and based on their findings, approve or disapprove this application for Remote Deposit Capture (snap2deposit).

By signing below, I confirm that I have read and understand MMFCU's Remote Deposit Capture (snap2deposit) Agreement & Disclosure and agree to be bound by its terms and conditions. I also understand that this service may be revoked without notice.

Signature:	Date:
Signature:	Date:

FUNDS AVAILABILITY DISCOSURE

The Funds Availability Disclosure provided as part of the Member and Account Agreement between the Member and Credit Union shall remain in effect for all transactions provided under this Remote Deposit Capture Product (Snap2Deposit).

The Credit Union's office location shall be used in all calculations that require a Location for determining Availability of Funds, as required by the National Credit Union Administration (NCUA), Federal Reserve Bank (FRB), Regulation CC (Reg CC), Uniform Commercial Code (UCC) of the State providing this product and any applicable Federal or State Regulations or Laws.

Staff Only				
Approved:	Declined:	Set-Up/Verified ACH on Account:		
Initial	Initial		Initial	
Date Approved/Denied & Set-Up/Verified:				
	Initial		Initial	