



Credit Card Authorized User Form (Add/Remove)

Adding an authorized user is a perfect way to share the benefits of your SF Fire Platinum Visa® credit card. Authorized users have full use of and access to the credit card account. However, they do not have the authority to add or delete cardholders, request replacement cards, or terminate/modify the existing card agreement.

To process your request to add an authorized user, please provide the information requested below and return this form to us by:

Mail: 3201 California Street, San Francisco, CA 94118 | Fax: 415.674.4680

Important Information SF Fire Credit Union is required, by federal law, to obtain, verify, and record information that identifies each person opening or having access to a SF Fire Account. I understand that you will ask for my legal name, residential address, Social Security Number (SSN), Phone Number, and Date of Birth.

Add an Authorized User (Required Information) In order for an individual to be named on this account in any capacity they must provide picture identification and documentation reflecting the individual's current residential address. Please submit one of following valid forms of identification: • Driver's License • US Social Security Card/ITIN • Passport • US Military ID • US Work Visa • Other Government Issued picture ID (2nd ID always required) • Voter ID • Birth Certificate • Utility bill (for residential address verification only). SF Fire Credit Union reserves the right to request additional identification.

Remove an Authorized User: Signature from Authorized User is not required. Please destroy the Authorized User's card.

AUTHORIZED USER(S)

	Full Name	Current Address	Social Security #	Date of Birth	Relationship
1. Add Remove					
2. Add Remove					
3. Add Remove					
4. Add Remove					

* Authorized User's signature is not required for removal

Authorized User 1 Signature: _____

Authorized User 2 Signature: _____

Authorized User 3 Signature: _____

Authorized User 4 Signature: _____

CARDHOLDER INFORMATION

I represent that I am the named account holder and authorize SF Fire Credit Union to add the above listed person(s) as an authorized user(s) on the account referenced below.

Signature of Cardholder _____
Date

Credit Card Number _____
Member Number

Internal Use Only: (For Adding Authorized User)

Verify **ALL** parties (borrower and authorized user) are in good standing with SF Fire Credit Union? YES NO
Obtain copy of Authorized Users ID (non-members only)? YES NO
OFAC ran on Authorized User (non-members only)? YES NO Employee Signature: _____

Received: Processed By: _____ Received: Processed By: _____

Documentation Used to Verify Authorized User 1: _____ Documentation Used to Verify Authorized User 2: _____

ID Type 1: _____ # _____ Exp: _____ ID Type 1: _____ # _____ Exp: _____

ID Type 2: _____ # _____ Exp: _____ ID Type 2: _____ # _____ Exp: _____

Add'l Documentation _____ Add'l Documentation _____