Utilities Employees Credit Union

PO Box 14864, Reading, PA 19612-4864

HSA Access Method Request Form

(Card and Convenience Checks)

Health Savings Account Owner's Name (First MI Last, Suffix) _____ Account Number _____

Email–*necessary for home banking and emergency contact* _____ Daytime Phone _____

Select Access Methods and Authorized Users

☐ Yes, I want a set of four FREE starter checks.
(Sets of checks and additional convenience checks are available to purchase, if needed).

☐ Yes, I want an *Advantages* VISA® *Check Card*™ for my Health Savings Account.
(Skip Authorized User Section below if you are only requesting card for primary owner).

☐ Yes, I want an *Advantages* VISA *Check Card*™ for a dependent .age 13 or over. (Complete and sign below.)

Authorized User Name #1

First MI Last, Suffix (if any) _____ Authorized User SSN _____

Address _____ Authorized User Date of Birth _____

City, State Zip Code _____

Authorized User Name #2

First MI Last, Suffix (if any) _____ Authorized User SSN _____

Address _____ Authorized User Date of Birth _____

City, State Zip Code _____

Access Method Agreement

I request Utilities Employees Credit Union to issue an *Advantages* VISA *Check Card*™ to the authorized user(s) named above. I understand that the authorized user will have access to all of the funds in and all information about my Utilities Employees Credit Union HSA Deposit Account, and that all these withdrawals may have important tax consequences for me. I agree that I will be liable for all transactions made by the authorized user. All information I provide on this form is true and correct and may be relied on by Utilities Employees Credit Union. I will not hold Utilities Employees Credit Union liable for any adverse consequences. I have read and understand this Access Method Agreement.

Signature of Health Savings Account Owner _____ Date _____

***Advantages* VISA *Check Card*™ Personal Identification Number (PIN)**

Please select your confidential four-digit PIN(s). PINs must be numeric. Do not choose 0000 or 9999. If you do not select **a PIN, one will be generated and mailed to you.**

Primary Member PIN: ☐☐☐☐ Authorized User #1 PIN: ☐☐☐☐ Authorized User #2 PIN: ☐☐☐☐