

Envision Credit Union Joint Removal Form

Member Number		Date
Accoun	nt Remova	ral
Primary Member's Name:		
Remove:	from the follo	owing share accounts:
	11 0111 1111 10110	List suffix or "all"
Joint Me	ember's Signatu	nture
Note: Member Service Request Form must be completed for all accounts requires re-qualification of	remaining own	vners staying on the account. Removal from any existing larough the lending department.
Debit C	ard Remo	oval
Primary Member's Name:		
Remove:		
s joint/authorized user on the Debit card agreement of:_		
Joint/Authorized Card User's Signature	OR	Primary Member's Signature
Signatures Witnessed by a Credit Union Employee:		
THIS NOTARY SECTION MUST	F BE COME	IPLETED IF SIGNATURE(s)
NOT WITNESSED BY A		
Sworn to or affirmed before me thisday	of	, 20 by means of
Sworn to or affirmed before me thisday physical presence or online notarization, known to me or who has produced	by	, who is personally
known to me of who has produced		as identification.
No	tary's Signature	
Credit union use only	ary s Signature	
Place MSR initials below for all completed steps:		
(int) Removed joint from all applicable accounts		
(int) Collected debit card of joint being removed (int) Block debit card for joint in XP2		
		orm is required (if primary member was not in office