

# South Jersey Gas Employees Federal Credit Union

## Signature Card Pay on Death (POD Account)

Acct. # \_\_\_\_\_ Date: \_\_\_\_\_

Name:(print) \_\_\_\_\_ SS#: \_\_\_\_\_

Street: \_\_\_\_\_ Birth Date: \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Telephone #: \_\_\_\_\_

### POD Payees

Payee 1

\_\_\_\_\_  
Name (print) Birth Date

\_\_\_\_\_  
Street, City, State, Zip

Payee 2

\_\_\_\_\_  
Name (print) Birth Date

\_\_\_\_\_  
Street, City, State, Zip

Payee 3

\_\_\_\_\_  
Name (print) Birth Date

\_\_\_\_\_  
Street, City, State, Zip

### Certification

Under penalties of perjury, I certify that the Social Security Number information provided on this form is true, correct and complete. I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding.

\_\_\_\_\_  
Signature of Owner Date

### Supplementary Agreement - Pay on Death (POD) Account

1. This account is subject to the Multiple Party Deposit Account Law (17:161-1), the by laws and regulations of the Credit Union, all laws and regulations of the State of New Jersey and the United States of America, and all future changes that may be made in them.
2. This is a Pay on Death account. Ownership cannot be changed by a Will.
3. This account belongs to the member who opened the account during his/her lifetime. Upon his/her death, the account will belong to the POD payee(s). If there are two or more payees, each surviving payee will own an equal share of the account. If a surviving payee subsequently dies, the remaining payee(s) will not own any portion of the deceased payee's share of the account.
4. The Credit Union will be protected against liability for all payments made according to the Multiple Party Deposit Account Law.
5. A regulation of the New Jersey Banking Department made this notice necessary. However, this notice does not affect the right of the owner to make withdrawals while alive.
6. The owner of this account may change its form by giving notice to the Credit Union in writing.
7. The owner of this account acknowledges having read this notice and agrees to be bound by it.

\_\_\_\_\_  
Signature of Owner

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