



## RECORD of ADDRESS &/or NAME CHANGE

Form can be filled out online then printed and faxed – Must have a signature

Account Number:

Primary Name:

Primary Social Security:

New Name (if applicable):

Joint Name:

Joint Social Security:

New Name (if applicable):

**Tennessee Employees Credit Union MUST have a physical address on file. We can ONLY use a PO Box for mailing purposes**

NEW Physical Address:

APT #:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

Work Phone:

Email:

**IF you wish to have your mail sent to a MAILING ADDRESS such as a PO BOX please complete the following section**

NEW Mailing Address:

City:

State:

Zip Code:

**Account services currently listed on the account which will need to be changed also**

- TNECU Debit Card     TNECU ATM Card     TNECU MasterCard     TNECU Virtual Branch

**Please send the following information for review**

- TNECU MasterCard Application     TNECU Loan Application     NEW MEMBER PACKET for a family member

- I grant Tennessee Employees Credit Union the authority to **FAX/EMAIL my account information** to me upon verbal request. I understand TNECU will NOT FAX/EMAIL any information to third parties. If at any time TNECU staff feels the verbal request is not authentic TNECU will NOT send the requested information.

**I give authorization for TNECU to make changes to all accounts as stated on this form**

PRINT NAME:

SIGNATURE:

DATE: