

**ENCOMPASS NIAGARA FEDERAL CREDIT UNION**  
**Customer Information File (CIF)**  
**Maintenance Request Form**

\_\_\_\_\_ **ADDRESS CHANGE**

\_\_\_\_\_ **NAME CHANGE** – Need new signature card and copy of driver’s license.

\_\_\_\_\_ **ADD JOINT OWNER**

\_\_\_\_\_ **OTHER** – Explain \_\_\_\_\_

**Please complete the following information:**

Account Number \_\_\_\_\_

Account Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Physical Address (If Different From Mailing Address) \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Previous Address \_\_\_\_\_

**Please list any other owners / signers / accounts that will be affected by this change of address**

Names: \_\_\_\_\_

\_\_\_\_\_

**Please change all of my accounts to the address listed above**

**Please change the following accounts to the address listed above**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**Customer’s Signature**

\_\_\_\_\_  
**Date**

**FOR OFFICE USE ONLY**

**Employee Receiving Request:**

Initial & Date \_\_\_\_\_

Update Compshare \_\_\_\_\_ Update Client-Central \_\_\_\_\_ Update Legacy \_\_\_\_\_