

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 _____