

# Navy Federal® Business Servicing Form

- Open Savings or Checking Products
- Close Savings or Checking Products

## (Instructions and General Information)

**Note:** For fastest processing, please review and follow all instructions. All owners must sign authorizing the changes if there are multiple owners.

### Beneficial Owner Certification

To help the government fight financial crime, federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers.

- If adding a new product, a certification regarding the most recent NFCU 98 provided to Navy Federal is required.
- If necessary, a new NFCU 98 may be required in order to open a new product.

### Add Products

- Fees may apply to Basic, Plus, and Premium checking accounts. Refer to the Business Services Schedule of Fees and Charges for more information.

### Close Products/Membership

This section is used to request the closure of specific products or to close the entire business membership.

- If funds are in an account that is requested to be closed, the owner(s) must indicate how funds should be disbursed.
- Accounts must be in good standing to be closed. Except for a Business Credit Card, all lending accounts must be paid in full to be closed.

### Signatory Authorization and Agreements

- Signatures must be provided by all business owners, entity owner representatives, and Authorized Signers.

### Submission Instructions

**Online:** Sign in to Online Banking and use the “Send Us a Message” option. Attach the completed form and supporting documentation.

**Navy Federal®**  
**Business Servicing Form**  
**Open/Close Savings or Checking Products**

Business Access No.

**INSTRUCTIONS:** Complete only the section(s) applicable to your request. All owners must sign authorizing changes.

Current Information	
Business Name:	Tax ID No. (EIN or SSN):

*To help the government fight financial crime, federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers. This section must be completed when adding a product.*

Beneficial Owner Certification
<p>Select one of the following:</p> <p><input type="checkbox"/> N/A – Business is a sole proprietorship, unincorporated association, or otherwise not applicable.</p> <p><input type="checkbox"/> Certification Regarding Beneficial Owners of Legal Entity Customers (NFCU 98) form attached.</p> <p><input type="checkbox"/> I certify that I am familiar with the most recent NFCU 98 form provided to Navy Federal and confirm that all information provided on that form is up to date and accurate.</p>

Add Products
<p><b>Note:</b> When adding a product/service, also complete the Beneficial Owner Certification section of this form. Please note that fees may apply to the Basic, Plus, and Premium checking accounts. Refer to the Business Services Schedule of Fees and Charges for more information.</p> <p><b>Add the Following Products: (Indicate number of accounts requested)</b></p> <p>___Business Basic Checking (owner and 1 signer allowed)    ___Issue Business Debit Card    ___Business Jumbo Money Market Savings</p> <p>___Business Plus Checking (unlimited signers)    ___Business Savings    ___Business Money Market Savings</p> <p>___Business Premium Checking (unlimited signers)    ___Business Membership Savings (minimum \$5 deposit required)</p>

Close Products/Membership
<p><b>Close the Following Products/Membership:</b></p> <p><input type="checkbox"/> Business Basic Checking    <input type="checkbox"/> Business Premium Checking    <input type="checkbox"/> Business Jumbo Money Market Savings</p> <p><input type="checkbox"/> Business Plus Checking    <input type="checkbox"/> Business Membership Savings    <input type="checkbox"/> Business Money Market Savings</p> <p><input type="checkbox"/> Close Lending Products    <input type="checkbox"/> Business Savings</p> <p><input type="checkbox"/> List Specific Account Number(s)</p> <p><input type="checkbox"/> Close Entire Business Membership    <input type="checkbox"/> Mail funds to Business Address on record    <input type="checkbox"/> Transfer funds to Navy Federal Account # _____</p> <p style="text-align: center;">(Requires form to be sent via eMessage with signatures)</p>

Signatory Authorizations and Agreements		
Owner 1 Signature ▶	Printed Name	Date (MM/DD/YY)
Owner 2 Signature ▶	Printed Name	Date (MM/DD/YY)
Owner 3 Signature ▶	Printed Name	Date (MM/DD/YY)
Owner 4 Signature ▶	Printed Name	Date (MM/DD/YY)
As Representative for Entity Owner 1 Signature ▶	Printed Name	Date (MM/DD/YY)
As Representative for Entity Owner 2 Signature ▶	Printed Name	Date (MM/DD/YY)

