

Navy Federal®
**Business Change of Information/
Additional Services Application**
(Instructions and General Information)

Note: For fastest processing, please review and follow all instructions. Complete only the section(s) applicable to the request. All owners must sign authorizing the changes.

Changes to General Information

Only changes to current information should be provided in this section. Any changes to business entity structure or ownership will require submission of additional or updated documentation to Navy Federal.

- Business name change requires submission of Articles of Amendment or an updated annual report showing the name change and any additional documentation required for the specific business entity type.
- New/Additional Doing Business As requires submission of a Doing Business As, Trade Name, or Fictitious Name Certificate.
- Changing Business Entity Structure requires submission of Articles of Amendment or state-filed conversion documents and any additional documentation required for the specific business entity type.
- Navy Federal recognizes that the title of Business Entity documents may vary by U.S. state, county, and/or locality. Navy Federal may accept documents that it determines meet its documentation requirements.
- Navy Federal may refuse membership due to any language, symbol, name, or d/b/a that could be construed as profane, obscene, or vulgar; sexually explicit; or offensive to any race, ethnic origin, nationality, gender or gender identity, religion, sexual orientation, or disability.

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 there is a change in ownership, a new Certification Regarding Beneficial Owners of Legal Entity Customers (NFCU 98) form is required.
- If adding a new product, a certification regarding the most recent NFCU 98 provided to Navy Federal is required.

Add Products

- When adding a product/service, complete the Beneficial Owner Certification section of this form.
- 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.

Add/Remove Owner(s)/Authorized Signer(s)/Authorized User(s)

- Authorized Signers are allowed access to all Business Checking and Savings accounts.
- Only the business owner(s) is/are allowed to add or remove Authorized Signers from business accounts.
- If Authorized Signer is not a current Navy Federal member, a copy of their government-issued ID is required.
- Any owners or Authorized Signers requesting to be added to the business membership must have all NFCU accounts (personal and business) in good standing.
- Authorized User authority is restricted to Business Credit Cards.
- If there is a change to an Authorized User on a Business Credit Card, complete the Business Credit Card Change of Information/Status (567CI).
- To add or remove an Authorized User from Navy Federal Online, complete the form Authorized User for Navy Federal Online Banking Application and Consent (652).
- **Note: When removing an owner, all owners (current and the one(s) being removed) must sign the 97BAC.**

Signatory Authorization and Agreements

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

Note: Authorized Signers only have to sign if being added.

Submission Instructions

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

Business Change of Information/Additional Services Application

Business Access No.

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

Please Note: Any changes to entity type or ownership will require updated business entity documents.

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

| Changes to General Information (Please provide new information only.) | |
|-----------------------------------------------------------------------|------------------------------|
| New Business Name: | New Tax ID No. (EIN or SSN): |

| Changes to a DBA(s) (including: the addition or removal of a DBA(s)) | | | |
|---------------------------------------------------------------------------|------------|-------|----------|
| Addition(s) | Removal(s) | | |
| Addition(s) | Removal(s) | | |
| Addition(s) | Removal(s) | | |
| New Physical Address of Business: Street (Cannot Be a Post Office Box) | City | State | Zip Code |
| New Mailing Address of Business: Street | City | State | Zip Code |

| List All Additional Locations of Business and the Associated DBA | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------------------|----------|----------------|
| Street | City | State | Zip Code | Associated DBA |
| Street | City | State | Zip Code | Associated DBA |
| Street | City | State | Zip Code | Associated DBA |
| New Business Phone: | New Alternate Phone: | New Business Email Address: | | |
| Change Business Entity Structure (Information will not be changed unless proper proof is received): | | | | |
| <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Sole-Member Limited Liability Company (LLC) <input type="checkbox"/> Multi-Member Limited Liability Company (LLC) | | | | |
| I have included the following as legal proof of existence of the business: | | | | |
| <input type="checkbox"/> Business License <input type="checkbox"/> Fictitious Name Certificate (or Certificate of Assumed Name) <input type="checkbox"/> Partnership Agreement <input type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Articles of Organization <input type="checkbox"/> IRS EIN Letter <input type="checkbox"/> Operating Agreement <input type="checkbox"/> Corporate Bylaws <input type="checkbox"/> Articles of Amendment/Conversion Document <input type="checkbox"/> Articles of Amendment <input type="checkbox"/> Other _____ | | | | |

| | |
|------------------------------|-------------|
| New Nature of Your Business: | NAICS Code: |
|------------------------------|-------------|

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 or adding/removing owner(s).

| Beneficial Owner Certification |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Select one of the following: |
| <input type="checkbox"/> N/A – Business is a sole proprietorship, unincorporated association, or otherwise not applicable. <input type="checkbox"/> Certification Regarding Beneficial Owners of Legal Entity Customers (NFCU 98) form attached. <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. |

| Add Products |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Note: 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. |
| Add the Following Products: |
| <input type="checkbox"/> Business Basic Checking (owner and 1 signer allowed) <input type="checkbox"/> Issue Business Debit Card <input type="checkbox"/> Business Jumbo Money Market Savings <input type="checkbox"/> Business Plus Checking (unlimited signers) <input type="checkbox"/> Business Savings <input type="checkbox"/> Business Money Market Savings <input type="checkbox"/> Business Premium Checking (unlimited signers) <input type="checkbox"/> Business Membership Savings (minimum \$5 deposit required) |

| Close Products/Membership |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Close the Following Products/Membership: |
| <input type="checkbox"/> Business Basic Checking <input type="checkbox"/> Business Premium Checking <input type="checkbox"/> Business Jumbo Money Market Savings <input type="checkbox"/> Business Plus Checking <input type="checkbox"/> Business Membership Savings <input type="checkbox"/> Business Money Market Savings <input type="checkbox"/> Close Lending Products <input type="checkbox"/> Business Savings <input type="checkbox"/> List Specific Account Number(s) _____ |
| <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 # _____ (Requires form to be sent via eMessage with wet signatures) |



