

LOCAL UNION 392 FEDERAL CREDIT UNION
1228 Central Parkway, Room 108
Cincinnati, Ohio 45202

ATM AGREEMENT

Local Union 392 Federal Credit Union has established ATM cards as a service to eligible members. Through the use of an ATM card our members will be able to deposit or withdraw funds from their account(s) without physically coming to the Credit Union office as the Credit Union is NOT A CASH OFFICE.

The Credit Union will offer ATM cards only to members or organizations of members of the Credit Union that have established a good history with the Credit Union, and who maintain the minimum \$10.00 balance in their primary savings and/or checking account(s).

Organizational accounts require a certificate of resolution from the Board of Directors of the organization. The authorized signatures will be changed only by a resolution reported by the Secretary of the organization. Only one signature of an authorized person will be required on an ATM account.

The Credit Union reserves the right to refuse an ATM card to any member or organization of members that has caused the Credit Union a loss, has a past history of misuse of other financial services at the Credit Union, a delinquent credit history, or a history of misuse with an open or closed checking or draft account with the Credit Union or elsewhere.

The Credit Union provides this service at a minimal cost to our membership (see Fee Schedule). The following are the guidelines/options for the use of this service:

1. Deposits may be made at the Credit Union office, any participating ATM, or by mail. Availability of these funds depends on their source and method of deposit. All deposits are subject to our fund availability policy.
2. The Credit Union reserves the right to adopt a service charge/fee schedule to cover costs based on use, cost of ATM cards, and/or abusive events.
3. Separate ATM Application forms and ATM Policy/Agreements must be signed by each member to obtain an ATM card.
4. Each member will have a limit set for ATM withdrawals based on the Credit Union's appraisal of his/her credit.
5. The Credit Union reserves the right to require a deposit based on the set daily withdrawal dollar amount limit.
6. Negative balances (overdrafts) are NOT tolerated for either primary savings or checking accounts and are subject to fees as stated in the fee schedule. The Credit Union reserves the right to pay or decline overdrafts at our discretion; and/or to close the account(s) or ATM card at any time.

The Credit Union cannot provide overdraft coverage for your ATM transactions unless you authorize us to do so. If you authorize us to allow ATM transactions that result in a negative balance, your account will be subject to applicable NSF and negative daily balances fees as specified in the fee schedule. If there are insufficient funds in your account and you have elected not to authorize overdraft coverage, your ATM transaction could be declined.

OVERDRAFT OPT IN AUTHORIZATION

_____ **I want overdraft coverage for ATM transactions**

_____ **I decline overdraft coverage for ATM transactions**

Any financial service provided by Local Union 392 Federal Credit Union may be used for any transaction permitted by law. I agree that illegal use of any financial service will be deemed an action of default and/or breach of contract and such service and/or other related services may be terminated at Local Union 392 Federal Credit Union's discretion. I further agree, should illegal use occur, to waive the right to sue Local Union 392 Federal Credit Union for such illegal activity directly or indirectly related to it. I also agree to indemnify and hold Local Union 392 Federal Credit Union harmless from any suits or other legal action or liability, directly or indirectly, resulting from such illegal use.

ATM PIN Numbers are not to be revealed to anyone. ATM PIN Numbers are issued to prevent other persons from accessing your account. YOU ARE RESPONSIBLE FOR THE SAFETY OF YOUR ATM PIN NUMBER.

I HAVE READ, UNDERSTAND AND AGREE TO ABIDE BY THE TERMS OF THE ABOVE ATM POLICY/AGREEMENT.

SIGNATURE _____ DATE _____