

MEMBER ADDRESS CHANGE REQUEST

Fill out this form, sign and return it either by person, fax, or mail to LANIER FEDERAL CREDIT UNION, hereinafter called (LFCU). A confirmation of your address change may be mailed to both your old and new address, and a confirmation phone call made to you, at the contact information previously on file. This is to prove your identity to safeguard your account. Please allow 5-10 business days for processing, or until member identity has been made confirmed.

Please call LFCU with any questions you may have regarding your address change at **(770) 503-1765**.

FAX: LFCU MEMBER SERVICES
(770) 503-1865
 email: LFCU@LanierFCU.org



MAIL: LFCU MEMBER SERVICES
3718 Mundy Mill Rd.
Oakwood, GA 30566-3417

PLEASE COMPLETE IN FULL

Name _____ Date _____

Social Security # _____ Driver's License # _____ State _____

Account Number(s) _____

Home Phone _____ Work Phone _____

E-mail Address _____ Cell Phone _____

New Physical Address	New Mailing Address <i>(if different than physical)</i>
Address _____	Address _____
Apt./Suite# _____	Apt./ Suite# _____
City _____ State _____	City, State _____ State _____
Zip Code _____	Zip Code _____

Services

If joint account, will this request apply to all account holders? Yes No

Note: A Change form must be completed for each separate account.

Member's Signature _____

LFCU STAFF ONLY	2 Types of Identification Confirmed: (SCAN DOC'S) DL, Passport, Utility bill, etc.		
Date Input:		Employee's Signature:	