

Payroll Deduction or Direct Deposit

To be Completed by All Members

Complete Section A

A: MEMBER INFORMATION

Name of Member: _____

Employer: _____

Department: _____

Occupation: _____

SIN or EMP#: _____

**For Provincial Gov't Employee, Employee # is required.*

Complete Section B or C

B: PAYROLL DEDUCTION

I hereby authorize the deduction of the sum of (\$ _____)

_____ dollars,

Weekly Bi-weekly Semi-monthly Monthly

From my salary effective _____

(dd/mm/yyyy)

and to take from the deductions in each succeeding pay period thereafter from my salary or wages which may be payable to me. This is your authorization to pay over the monies thus withheld to the Public Service Credit Union Ltd., 403 Empire Ave., St. John's NL, A1E 1W6. This deduction authorization cancels all previous authorizations, and cannot be cancelled or amended without written consent of the Credit Union.

C: DIRECT DEPOSIT

Transit# 18143 Branch# 839

Account#

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Employee Signature _____

Witness Signature _____

Dated this: _____

(dd/mm/yyyy)

Mail to address on front or fax: 709.579.3746

FOR OFFICE USE

2016

Account#	Plan#	
01	22	71
09	23	76
10	25	78
16	27	80
20	70	

What is the SPD?

Apply
October 31st
Deadline

- **Special Payroll Deposit (SPD)** is a savings plan via payroll deduction/direct deposit.
- Interest is paid monthly.
- Upon maturity (November 1st) easy access to your money with Online Banking, Debit Card, or during business hours.
- No Fees, Service Charges or Penalties for early withdrawals, **Maximum 2 withdrawals per a 12 month period.**
- Applications received generally September to October
- An option to register your Special Payroll Deposit for your retirement - RRSPP or a Tax Free Savings Account (TFSA)

HOW MUCH CAN I SAVE IN ONE YEAR?

To save in one year	Bi-weekly 26 pay periods	Semi-monthly 24 pay periods	Monthly 12 pay periods
\$500	\$19.23	\$20.83	\$41.67
\$1,000	\$38.46	\$41.66	\$83.34
\$1,500	\$57.69	\$62.50	\$125.00
\$2,000	\$76.92	\$83.33	\$166.68
\$2,500	\$96.15	\$104.16	\$208.35
\$3,000	\$115.38	\$125.00	\$250.00
\$3,500	\$134.62	\$145.84	\$291.67
\$4,000	\$153.85	\$166.66	\$333.34
\$4,500	\$173.08	\$187.50	\$375.00
\$5,000	\$192.31	\$208.34	\$416.67

By choosing the pay period which best suits you: either monthly, semi-monthly, or bi-weekly, you can customize your Special Payroll Deposit to meet your financial needs.



PUBLIC SERVICE

Special Payroll Deposit

How Much Can I Save?



Your Money



Your Financing

Your Future

Membership is open to all residents of Newfoundland & Labrador.

403 Empire Avenue, St. John's, NL A1E 1W6

Tel: 709.579.8210 | Toll Free: 1.800.563.6755

Fax: 709.579.3746 | www.pscu.ca | pscuadmin@pscu.ca

Membership and Personal Account Application

Existing and New Members Must Complete All Fields

Public Service Credit Union _____ Are you a current Credit Union member? Yes No _____
(the "Credit Union") Member Number

APPLICANT PERSONAL INFORMATION

Mr. Mrs. Ms. Miss Dr. Other Marital Status: Single Married Common Law Separated Divorced Widowed

First Name	Middle Name	Last Name	Birth Date (dd/mm/yyyy)	Gender
Personal Reference	Address			Phone Number

ADDRESS

Current Home Address - Street	City	Province	Postal Code	Country	Years at Address	<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Live with Parents
Mailing Address - Street (if different from above)	City	Province	Postal Code	Country	Years at Address	
Previous Address - Street (if less than 2 years)	City	Province	Postal Code	Country	Years at Address	
Home Phone	Cell Phone	Email Address	Preferred Method of Contact	Best Time of Day for Contact		

TAX RESIDENCY (check all that apply)

I am a tax resident of Canada. Provide your Social Insurance Number: _____
If you do not have a SIN, provide the reason: _____

I am a tax resident or a citizen of the United States. Provide your taxpayer identification number (TIN): _____
If you do not have a TIN from the United States, have you applied for one? Yes No

I am a tax resident of a jurisdiction other than Canada or the United States. Provide the tax jurisdiction and your taxpayer identification number.
Jurisdiction of Tax Residence _____ TIN: _____
If you do not have a TIN for a specific jurisdiction, provide the reason _____

EMPLOYMENT

Employment Status:
 Part Time Full Time Retired Unemployed Seasonal Self Employed Other- Student Up to Grade 12 Other- Undergraduate University Other- Graduate Masters/PHD

Employment Type: Employed- Part Time Employed- Full Time Unemployed Industry Sector: _____ Occupation: _____

Occupation Description: _____ Employer Phone: _____

IDENTIFICATION (2 valid government issued ID's required; i.e. Driver's License, Passport, MCP, etc)

ID Method: Photo Source Credit File Financial Account Belong to Same Central Affiliate/Agent

I.D. #1	Type/Source Date	Ref #	Place and Country of Issue	Expiry Date	Other
I.D. #2	Type/Source Date	Ref #	Place and Country of Issue	Expiry Date	Other

POLITICALLY EXPOSED PERSON (Credit unions that use a software program to scan for PEPs, PEPF or HIOs do not need to ask this question)

According to the federal Proceeds of Crime (Money Laundering) and Terrorist Financing Act - Section 9.3(3) definitions:
Are you a Politically Exposed Foreign Person (PEFP) or are you a family member or close associate of a PEFP? No Yes
Are you a Politically Exposed Domestic Person (PEDP) or are you a family member of a PEDP? No Yes
Are you a Head of an International Organization (HIO) or are you a family member of a HIO? No Yes

If applicable, complete a Politically Exposed Persons or Head of an International Organization Record and attach to this agreement.

BENEFICIARY INFORMATION

Pursuant to the Credit Union Act, as amended, I hereby nominate my _____, _____, _____
of _____, _____, _____
Residential/mailling address & Phone Number
as the person to receive the monies, standing to the credit of my share and deposit accounts in the said Credit Union at my death, less any indebtedness owing by me to the Credit Union.

JOINT ACCOUNT

Is this a Joint Account? No Yes (if there are more than two applicants, attach additional page 1)

Signing Authority

Unless alternate signing authority is provided, we agree that any one joint account holder can operate or instruct the Credit Union to act in respect of the Joint Account separately. If alternate instructions are required, complete the Personal Joint Account Signing Authorities and attach it to this agreement.

INTENDED USE OF ACCOUNT

Type of Account: Shares Chequings Savings Term Deposits

Account Type

Intended Use:

Car Purchase/Expenses Credit Union Shares Education
 Family and Household Inc/Exp Investment Pension Income Renovations
 Rental Property Inc/Exp Retirement Taxes Travel/Vacation

Account Pkg.

THIRD PARTY INFORMATION

Will any account under this Membership be used by or on behalf of another party other than the named applicant(s)? No Yes

If Yes, complete a Third Party Determination Record and attach it to this agreement.

ACCOUNT STATEMENTS

Statement Language Preference: English French

I/We wish to access statements relating to my accounts in electronic format.

Other _____

CONSENT

Yes, I/We do No, I/We do not
Give consent for the credit union to promote their services to me.

Yes, I/We do No, I/We do not
Give consent for my information to be shared with partner organizations so they may promote their services to me.

Yes, I/We do No, I/We do not
Give consent to receive commercial electronic messages to promote your services, products and general credit union marketing information to me.

If at any time in the future you wish to withdraw your consent to the collection, use or disclosure of your personal information, you may indicate your intention by completing the Withdrawal of Consent section in the Credit Union's Privacy Brochure or using the 'Opt Out of Electronic Communications' option that is contained in our electronic communications to you.

AGREEMENT AND AUTHORIZATION

I CERTIFY THAT THE INFORMATION THAT I HAVE PROVIDED IN THIS, AGREEMENT FOR MEMBERSHIP IN **Public Service Credit Union** ("Credit Union"), is correct and complete. I have read, understand and I agree to the Standard Terms and Conditions of the Personal Membership and Financial Services Agreement ("Agreement") which have been provided to me, and furthermore agree to be bound by its terms inclusive of fees and interest rates which I have been informed of. I also agree that this Agreement is subject to any applicable approvals as may be required pursuant to any provincial laws or bylaws of the Credit Union, the applicable provincial statute and regulations governing the Credit Union and any bylaws of the Credit Union, all as amended or enacted from time to time. I acknowledge that if I wish to use Debit Card Services I will be bound by the conditions of the Debit Card/Personal Identification Number Agreement which I have been provided. I acknowledge that if I wish to access Online Banking I must enter into an Online Service Agreement with the Credit Union. I acknowledge receipt of the Standard Terms and Conditions. I consent to the Credit Union obtaining such credit information about me as it may require from time to time in connection with any accounts or loans for which I apply. If I have a change in tax residency, I will notify the Credit Union within 30 days of the change and provide the details of the change.

Applicant Signature _____

Witness Signature _____

Date _____