

# Transaction Authorization Code ("TAC") Request

Police and Fire Federal Credit Union

Please print

Member Account #: \_\_\_\_\_

Member Name: \_\_\_\_\_ Joint Owner: \_\_\_\_\_

Joint Owner: \_\_\_\_\_ Joint Owner: \_\_\_\_\_

Transaction Authorization Code: \_\_\_\_\_

*(Code must be between six (6) and forty (40) characters. Numbers and letters may be used.)*

I/We, the undersigned, do hereby acknowledge receipt of our "Transaction Authorization Code" (TAC). The TAC **must** be used by me/us in order to transact any and all PFFCU business performed over the telephone, by mail, or in person, including the transfer of funds into or out of my/our account and wire transfers. The TAC is not necessary if a PIN or password must be entered to access a service.

I/We have chosen my/our TAC, which is shown above. I/We understand that this Transaction Authorization Code, along with any other requested information, is for the sole purpose of identification and that failure to provide it, on request, will **prohibit** me/us from completing transactions or accessing information on my/our account with PFFCU. I/We understand that PFFCU reserves the right to request any other information necessary, in addition to the TAC, to verify my/our identity, to PFFCU's satisfaction, before completing any transaction.

I/We further understand that this Transaction Authorization Code may not be deleted or changed, except with the written consent of all joint owners on the account. If there is a change in the ownership of the account(s), a new TAC must be chosen. **In no event can or will a TAC be used to limit the use or access of the account by any other owner of the account. A TAC will not be placed on an account or changed if this form is not completed properly.**

I/We agree that if this Transaction Authorization Code is lost, stolen, forgotten, misplaced, or otherwise, I/we will apply to PFFCU for another code, and that each owner must sign and acknowledge receipt thereof. I/We also agree not to disclose the TAC to any person who is not an owner of this account. Any person providing the TAC, via telephone, mail, internet transaction, or in person along with any other information requested, will be deemed authorized to complete said transaction.

I/We understand and agree that the TAC is being placed on the account pursuant to my/our request and that PFFCU is not and will not be liable for any damages, whatsoever, including, but not limited to actual, consequential or punitive damages for failure to complete any transaction because of my/our failure to provide my/our TAC, or other requested identification, or for completing any transaction where the proper TAC was provided. In addition, I/we agree that PFFCU shall not be liable for not placing or changing a TAC on my/our account if this form is not completed properly.

**X** \_\_\_\_\_

**X** \_\_\_\_\_

**X** \_\_\_\_\_

**X** \_\_\_\_\_

<input type="checkbox"/> <b>TAC REMOVAL</b> I/We request that the TAC that was placed on this account be removed and understand that this account can now be accessed without providing the TAC. If this is a joint account, all owners, by their signatures, agree to the removal of the TAC.	<b>PFFCU USE ONLY</b> Completed by: _____ Date: _____ Teller#: _____
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