Appointee Information Form

Power of Attorney, Guardian or Conservator



Form Instructions: Complete all applicable areas on the form and sign and date in the signature area. Include

a copy of a non-expired government or state-issued ID with your completed application.

Print and mail the completed form to: Delta Community Credit Union

ATTN: Personal Deposit Services, P.O. Box 20541 Atlanta, GA 30320-2541, or fax to 404-677-4802

Email not recommended

Primary Member Information							
Name (First, MI, L	ast)	Social Security Nu	mber A	Account Number			
Please select	one of the following	:					
□ Power of	Attorney						
A Power of Attorney document (which meets applicable state requirements) must be approved by the Credit Union							
☐ Guardian or Conservator Please provide Letters of Guardianship/Conservatorship evidencing authority							
Appointee Information							
Appointee Name (First, MI, Last)		Social Security Number Date of		Date of Birth (MM/DD/YY	of Birth (MM/DD/YYYY)		
Street Address (No P.O. Boxes)							
City	State		Zip	Years a	at Current Address		
Home Phone	Work Phone	Mo	bile Phone	Email			
ID Type:	☐ Driver's License	☐ State Issued ID	☐ US Passpor	t □ US Military I	D		
ID Number State of Issue/Military Branch			Issue Date	Expiration Date			



P.O. Box 20541, Atlanta GA 30320-2541

Telephone: (404) 715-4725 Toll-Free: (800) 544-3328 Web: DeltaCommunityCU.com

Appointee Certification of Validity of Power of Attorney Not applicable for Guardian or Conservator

l,	(name of agent), certify under polymers. (name of principal) granted me au	enalty of perjury that ithority as an agent or successor agent in			
a power of attorney dated (MM/DD/YYYY).					
	certify that to my knowledge:				
	The principal is alive and has not revoked the power of attorney or my authority to act under the power of attorney and the power of attorney and my authority to act under the power of attorney have not terminated;				
	. If the power of attorney was drafted to become effective upon the happening of an event or contingency, the event or contingency occurred;				
3.	3. If I were named as a successor agent, the prior agent is no longer able or willing to serve.				
Signat Notary r	tures not required for guardian or conservator				
Signatu	re of Appointee	Date			
Signature of Notary		My Commission Expires			

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