

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.
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, Last) Social Security Number Account Number

Please select one of the following:

- Power of Attorney**
A non-Delta Community Credit Union Power of Attorney must be approved by the Legal Department

- Guardian or Conservator**
Please provide Letters of Guardianship/Conservatorship evidencing authority

Appointee Information

Appointee Name (First, MI, Last) Social Security Number Date of Birth (MM/DD/YYYY)

Street Address (No P.O. Boxes)

City State Zip Years at Current Address

Home Phone Work Phone Mobile Phone Email

ID Type: Driver's License State Issued ID US Passport US Military ID

ID Number State of Issue/Military Branch Issue Date Expiration Date

Appointee Certification of Validity of Power of Attorney

Not applicable for Guardian or Conservator

I, _____ (name of agent), certify under penalty of perjury that
_____ (name of principal) granted me authority as an agent or successor agent in
a power of attorney dated _____ (MM/DD/YYYY).

I further certify that to my knowledge:

1. 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;
2. If the power of attorney was drafted to become effective upon the happening of an event or contingency, the event or contingency occurred;
3. If I were named as a successor agent, the prior agent is no longer able or willing to serve.

Signatures

Notary not required for guardian or conservator

Signature of Appointee

Date

Signature of Notary

My Commission Expires