



BAHAMA ISLANDS CO-OPERATIVE CREDIT UNION LIMITED (BICCU) WITHDRAWAL REQUEST

DUE DATE: _____

DATE: _____

A/C#: _____

Member's Name: _____
(PLEASE PRINT)

Withdraw: _____ Dollars
(Words)

(\$ _____)
(Figures)

SAVINGS _____ CHEQUING _____
Bank Account Type (Please Circle)

Direct Transfer Info:

Bank's Name & Branch

Payable To: _____
(If Other Than Account Holder/Member)

Your Account Number

DISCLAIMER: It is the sole responsibility of the member when requesting a Direct Transfer/Deposit to ensure that the information provided for the bank's name, branch, account number and/or account type are correct. BICCU will not be held liable where the information provided is incorrect.

FROM MY: PLEASE TICK ALL THAT APPLY

- | | |
|---|---|
| <input type="checkbox"/> Vacation Club Account | <input type="checkbox"/> Regular Savings Account |
| <input type="checkbox"/> Christmas Club Account | <input type="checkbox"/> Loan Payment Waiver |
| <input type="checkbox"/> Kall Account | <input type="checkbox"/> School Fee/Education Club Account |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> KIDDS Club Account (Max of 2 Withdrawals Annually) |

NOTES:

- Only 2 FREE withdrawals are allowed from the Christmas Club account per year. \$25 will be charged for additional withdrawals
- There is a \$10.00 Fee for withdrawals from the School Fee and Vacation Club Accounts
- There is a \$10.00 fee for waiving the 30-days wait on Regular Savings Account Withdrawals of available funds
- A Loan Payment Waiver Is allowed every six months. The fee of \$25.00 is deducted from the requested amount. I realize that this payment waiver will increase both the balance and term of my loan

Member's initials required

Signature _____

DO NOT WRITE BELOW THIS POINT - OFFICIAL USE ONLY

VERIFICATION:

Beneficiary

KYC Information

Verified By

Date Verified

DATE POSTED: _____

CHEQUE #: _____

POSTED BY: _____

Please Deduct/Collect: \$10 \$25 Other _____

Fee Paid: \$10 \$25 Other _____

Regular Savings Account Withdrawal & Loan Payment Waiver(s) Approval:

Savings Balance: \$ _____

Fixed/Other Balance: \$ _____

Loan Balance: \$ _____

MasterCard Limit: \$ _____

Available Balance: \$ _____

Comment: _____

Date: _____

Approved By: _____

Comment: _____

REVISED JULY 1ST, 2015