



Member Identification Program (MIP) Authorization

The USA Patriot Act of 2001, Section 326, requires Roanoke Valley Community Credit Union to verify the information that you give us to open your account. By signing below, you are giving us authorization to verify the required information under the USA Patriot Act.

Applicant Information

Full Name _____

Current Address _____

City _____ ST _____ Zip _____

Date of Birth _____

Social Security # _____

Co-Applicant Information

Full Name _____

Current Address _____

City _____ ST _____ Zip _____

Date of Birth _____

Social Security # _____

I understand that a consumer credit report from Equifax Credit Information Services will be obtained before accepting my application for membership for verification purposes.

Applicant Signature _____ **Date** _____

Co-Applicant Signature _____ **Date** _____

Equifax Credit Information Services
P.O. Box 740241
Atlanta, GA 30374-0241
(800) 685-1111

Received: By _____ Date _____