Wepawaug-Flagg
FEDERAL CREDIT UNION

105 Sanford Street • Hamden, CT 06514 • (203) 288-1695 • FAX (203) 230-9435
249 West Main Street • Branford, CT 06405 • (203) 786-6410 • FAX (203) 786-6416
200 Orange Street • New Haven, CT 06510 • (203) 946-8700 • FAX (203) 946-8702
501 Crescent Street, New Haven, CT 06515 • (203) 392-9900 • FAX (203) 392-9905

REPLACEMENT CARD APPLICATION

☐ **ATM CARD**

(Check your selection) ☐ **VISA DEBIT CARD**

Personal Information

Please complete all informal letters and print clearly. Only one (1) card per signer.

Cardholder 1 Name: _____
First Last MI (optional)

Cardholder 2 Name: _____
(Business Name) First Last MI (optional)

Mailing Address: _____

Credit Union Use Only

Order Date: _____

_____
City State ZIP

Member Number: _____ Number of Cards: _____

Signatures:

Authorized Signer/Cardholder 1: _____

Authorized Signer 2: _____

PLEASE NOTE: There will be a $5 replacement fee when reordering your card(s). The Credit Union will waive the $5 replacement fee for stolen cards only.

INFORMATION ABOUT YOUR CARD

1. Your check card will be received in five to ten business days.
2. Upon receiving your card, you will need to call to activate it from a number that was previously provided to the Credit Union. Please verify you have up to date contact information listed with the credit union.
3. You will be prompted to select a PIN automatically after successful activation over the phone.