

*Culver City Employees Federal Credit Union*

**HFS**  
**Home Financial Services**  
**(Terms, Agreement and Conditions)**

*Welcome to Home Financial Services (HFS) through Culver City Employees Federal Credit Union.*

*Home Financial Services (HFS) is a 24/7 internet based access to your accounts here at Culver City Employees Federal Credit Union allowing you to view and make transactions in your account(s).*

*There is NO monthly service charge to our members for using HFS; however, other fees already established may be charged to your account (such as a fee for excessive withdrawal from your share/savings account – see fees schedule or request a schedule from the credit union office).*

**Terms, Agreement & Conditions:**

- *Any member in good standing with the credit union may sign up for the Home Financial Services (HFS)*
- *HFS is an internet based service connecting members to their share/savings, loan accounts, checking accounts and other accounts already established, allowing you to make transactions on-line*
- *Abuse or misuse of this service will result in your access to HFS being revoked*
- *Access to the service requires your credit union account number and a personal identification number (PIN) that you establish when you first sign on --- you MUST remember this PIN, as the credit union has no knowledge or access to your PIN*
- *You will be given a temporary PIN for first time sign-on which will HAVE to be changed*
- *You must keep your PIN confidential; any transactions done via the HFS will NOT be reversed nor will your account be re-credited/reimbursed for these transactions*
- *You will be charged a fee for a new PIN*
- *HFS transactions are not final until downloaded and received by the credit union which occurs at regular scheduled times throughout the day*

*By signing below I agree that I have read and agree to the terms, agreement and conditions for using HFS.*

\_\_\_\_\_  
*Member Account No.*

\_\_\_\_\_  
*email address*

\_\_\_\_\_  
*Print Primary Name*

\_\_\_\_\_  
*Print Joint Owner*

\_\_\_\_\_  
*Signature Primary*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature Joint Owner*

\_\_\_\_\_  
*Date*

*Return To Credit Union*

**CULVER CITY EMPLOYEES FEDERAL CREDIT UNION  
INTERNET BANKING AGREEMENT ELECTRONIC FUND TRANSFERS**

**Type of Transfers**

You may access your accounts by computer using your account number and password to:

1. Obtain account balances and transaction information from your designated accounts.
2. Transfer funds between your designated shares and loans.
3. Transfer funds from your account to the savings or Share Draft checking account of another CCEFCU member.
4. View account history, and print copies of paid Share Drafts checks.
5. Download account information from your designated accounts into a financial management software package.
6. Arrange bill payment services from your designated accounts through available bill pay service. Bill pay is an option on the credit union's home banking site.

**Limitations of Frequency of Transfers**

Transfers from a savings account to another account or to third parties by preauthorized, automatic, telephone or computer transfers are limited to six per month with no more than three by check, debit card or similar order to third parties. For security reasons there are other limits on the number of transfers you can make by computer.

**Periodic Statements**

You will get a monthly account statement from us for your share draft account.

You will get a monthly account statement from us for your savings accounts if you have had transfers during that month. You will receive a statement quarterly if you have had any other type of activity in your account.

**Your Rights and Liabilities**

Security of your transactions is important to us. Use of the HFS services will therefore require a password. If you lose or forget your password, please call 310-253-6060 during normal business hours. We will accept as authentic any instructions given to us through the use of your password. You agree to keep your password secret and to notify us immediately if your password is lost or stolen or if you believe someone else has discovered your password. You agree that if you give your password to someone else, you are authorizing them to act on your behalf, and we may accept any instructions they give us to make transfers or otherwise use the HFS services. You may change your password at any time. We may be liable for certain security breaches to the extent required by applicable law and regulation. We do not assume any other liability or otherwise guarantee the security of information in transit to or from our facilities. Please note that we reserve the right to (1) monitor and/or record all communications and activity related to the HFS services; and (2) require verification of all requested transfers in the manner we deem appropriate before making the transfer (which may include written verification by you).

You agree that our records will be final and conclusive as to all questions concerning whether or not your password was used in connection with a particular transaction.

If any unauthorized use of your password occurs you agree to (1) cooperate with us, and appropriate law enforcement authorities in identifying and prosecuting the perpetrator; and (2) provide reasonable assistance requested by us in recovering any unauthorized transfer of funds.

Notify us immediately if you believe your password has been lost or stolen. Telephoning is the best way to keep your possible losses down. You could lose all of the money in your account (plus your maximum line of credit). If you tell us within two (2) business days you can lose no more than \$50.00. If you do NOT tell us within two (2) business days after you learn of the loss of theft of your password, and we can prove we could have stopped someone from using your password without your permission if you had told us, you could lose as much as \$500.00. Also, if your statement shows transfers that you did not make, tell us at once. If you do not tell us within sixty (60) days after the statement was mailed to you, you may not get back any funds you lost after the 60 days if we can prove that we could have prevented someone from taking the funds if you had told us in time. If you believe your password has been lost or stolen or that someone has transferred or may transfer money from your account without your permission, call 310-253-6060 during normal business hours.

**WE CANNOT ACCEPT NOTIFICATION OF LOST OR STOLEN PASSWORDS OR UNAUTHORIZED TRANSFERS VIA E-MAIL.**

**Error Resolution Notice**

In case of errors or questions about your electronic transfers call us at 310-253-6060 or write us at: Culver City Employees Federal Credit Union, 9770 Culver Blvd , Culver City, CA 90232. Notify us immediately if you think your statement or receipt is wrong or if you need more information about a transaction listed on the statement or receipt. We must hear from you no later than 60 days after we sent the FIRST statement on which the problem or error first appeared.

- (1) Tell us your name and account number
- (2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information
- (3) Tell us the dollar amount of the suspected error

If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days. We will determine whether an error occurred within 10 business days (20 business days for new accounts) after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days (90 days for new accounts or point-of-sale or foreign-initiated transfers) to investigate your complaint or questions. If we decide to do this, we will credit your account within 10 business days (20 business days for new accounts) for the amount you think is in error, so that you will have use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account for 30 days after the first deposit is made.

We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation.

You may ask for copies of the documents that we used in our investigation.

**Confidentiality**

We may disclose information to third parties about your account or the transactions you make; a) where it is necessary for completing transactions or resolving errors involving the services; or b) in order to verify the existence and condition of your account for a third party, such as a credit bureau or a merchant; or c) in order to comply with government agency rules, court orders, or other applicable law; or d) to our employees, service providers, auditors, collection agents, affiliated companies, or attorneys in the course of their duties and to the extent allowed by law; or e) if you give us permission.

**Limitation of Liability**

Except as otherwise provided in this Agreement or by law, we are not responsible for any loss, injury, or damage, whether direct, indirect, special or consequential, caused by the HFS service or the use thereof or arising in any way out of the installation, operation, or maintenance of your PC equipment.

**Waivers**

No waiver of the terms of this Agreement will be effective, unless in writing and signed by an officer of the credit union.

**Assignment**

You may not transfer or assign your rights or duties under this Agreement.

**Governing Law**

The laws of the State of California shall govern this Agreement and all transactions hereunder. Member acknowledges that he/she has reviewed this Member Agreement, understands the terms and conditions set forth herein, and agrees to be bound hereby.

**Indemnification**

Member, in consideration of being allowed access to the HFS services, agrees to indemnify and hold the Credit Union harmless for any losses or damages resulting from the use of the HFS services, to the extent allowed by applicable law.

Culver City Employees Federal Credit Union 9770 Culver Blvd., Culver City CA 90232

310-253-6060

Signature \_\_\_\_\_

Date \_\_\_\_\_

Joint Signature \_\_\_\_\_

Date \_\_\_\_\_

Culver City Employees Federal Credit Union  
BILL PAYER

BILL PAYER is an Internet based bill payer service designed to make your life a little bit easier. Access the service anytime, day or night, from the Internet. If you would like to take a trial run before you complete the attached enrollment form, log onto [www.ccefcu.org](http://www.ccefcu.org) select Bill Payer and click on the Demo button.

BILL PAYER is available to all Culver City Employees Federal Credit Union members with a share draft (checking) account in good standing. You must have signed up for automatic overdraft protection from your share (savings) account. This will permit us to automatically transfer funds from your share account to cover any overdrafts. Of course, if funds are not available in the share account, we will access your line of credit with Culver City Employees Federal Credit Union (if available) or we will have to return the item for insufficient funds and charge the applicable fees. This service is for consumer use only and therefore, we cannot permit any type of business account to utilize BILL PAYER.

Please read the attached agreement carefully and don't hesitate to ask any questions that you may have.  
**This service is free.**

**BILL PAYER Enrollment Form**

NOTE: You must sign up for HFS home banking with Culver City Employees FCU to enroll in BILL PAYER.

**PRIMARY**

Name \_\_\_\_\_ Soc Sec# \_\_\_\_\_ Date of Birth \_\_\_\_\_

**SECONDARY (if applicable)**

Name \_\_\_\_\_ Soc. Sec# \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_

Please debit my credit union account # \_\_\_\_\_ for payment of my bills.

**AUTHORIZATION:** By signing below, I am applying for BILL PAYER service, acknowledging receipt of the terms and conditions of this agreement and disclosure statement to which I agree to be bound; and certifying that all information I have provided is accurate. By signing this enrollment form, I am voluntarily contracting with Culver City Employees Federal Credit Union to act as my agent, to include electronic remittance and origination provisions to any merchant that I add to my BILL PAYER account.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Joint Signature \_\_\_\_\_ Date \_\_\_\_\_