



## Consent Form for ATM & Everyday Debit Overdraft Service

### What You Need to Know about Overdrafts and Overdraft Fees

An overdraft occurs when you do not have money in your account to cover a transaction, but we pay it anyway. Your credit union can cover your overdrafts in two different ways:

1. We have standard overdraft practices that come with your account.
2. We also have overdraft protection plans, such as a link to a savings account, which may be less expensive than our standard overdraft practices. To learn more, ask us.

This notice explains our standard overdraft practices, please review it carefully.

#### What are the standard overdraft practices that come with my account?

ICCU authorizes and pays overdrafts for the following types of transactions:

- Checks and other transactions made using your checking account number
- Automatic bill payments

ICCU does not authorize and pay overdrafts for the following types of transactions unless you ask us to do so (see below):

- ATM transactions
- Everyday Debit card transactions

Your credit union pays overdrafts at our discretion, which means we do not guarantee that we will always authorize and pay any type of transaction. If we do not authorize and pay an overdraft, your transaction will be declined.

#### What fees will I be charged if Isabella Community Credit Union pays my overdraft?

Using our standard overdraft practices:

- We will charge a fee up to **\$28** each time we pay an overdraft on your account.
- There is no limit on the total fees we can charge you for overdrawing your account.

**What if I want Isabella Community Credit Union to authorize and pay overdrafts on my ATM and everyday debit card transactions?** If you also want us to authorize and pay overdrafts on ATM and everyday debit card transactions, call **989-773-5927**, or simply complete the form below and present it at any ICCU location, fax it to 989-773-6469 or mail it to the address below.

I do want ICCU to authorize and pay overdrafts on my ATM and everyday debit card transactions. I understand that I can revoke this consent at any time by contacting an ICCU employee.

I do not want ICCU to authorize and pay overdrafts on my ATM and everyday debit card transactions.

NAME: \_\_\_\_\_ ACCOUNT NUMBER: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_