

DUPONT COMMUNITY CREDIT UNION

A . R . T .  
(AUDIO RESPONSE TELLER)  
APPLICATION

For Office Use Only	
I	_____ -
D	_____ -

Primary Member Name: \_\_\_\_\_ Account Number \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Name of Joint Owner to have access to this account: \_\_\_\_\_

**I understand that I need a personal identification number (PIN) to access the Audio Response Teller. By signing below, I authorize you to send my PIN to me and agree that all uses of ART will be governed by the Access Agreement and Disclosure Statement which I have read.**

\_\_\_\_\_  
Primary Member Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

**Note: You will not be able to access ART until your PIN information has been returned to you. Questions? Call the Credit Union at (540) 946-3200, or 1-800-245-8085.**

## **DUPONT COMMUNITY CREDIT UNION**

### **Audio Response Teller (ART) Access Agreement and Disclosure (Reg. E)**

Your use of DuPont Community Credit Union's (DCCU) Audio Response Teller (ART) constitutes an agreement between you, and any joint owner of this account, and DCCU.

#### **You may use ART to:**

- |                       |                              |                                   |
|-----------------------|------------------------------|-----------------------------------|
| * Check balances      | * Make credit card payments  | * Verify certificate information  |
| * Transfer money      | * Check credit card balances | * Place a stop payment on a check |
| * Verify transactions | * Make loan payments         | * Change your PIN                 |

All withdrawals and transfers from your accounts with us are subject to the Rules and Regulations of DCCU, our Funds Availability Disclosure, our Fee Schedule, and the affected loan agreement. You received copies of these documents, and they are available at any of our branches, or by calling us at the number shown at the end of this disclosure. We reserve the right to amend these documents as provided without notice as allowed by federal and/or state law and regulation.

#### **Electronic Funds Transfer Disclosure**

An Electronic Funds Transfer (EFT) is any transaction involving funds initiated through an electronic terminal or telephone authorizing DCCU to debit or credit your account.

#### **Notice of Liability**

In the event you believe your personal identification number (PIN) has been lost or stolen, you must notify DCCU at once at (540)946-3200 during business hours. If you notify us within 2 business days (Our business days are Monday through Friday except for holidays), you may be liable for no more than \$50.00 if unauthorized transactions occurred on your account. If you do not notify us within 2 days after the discovery of the loss or theft of your PIN and DCCU can prove that such transactions could have been prevented had you notified DCCU promptly you may be liable for as much as \$500.00.

If your statement reflects EFTs that you did not make, notify DCCU immediately. If you do not notify DCCU within 60 days after your statement was mailed to you, you may be liable for the entire amount of the transactions if DCCU can prove that, had such a notice been provided, the transactions could have been prevented. You may also be liable for the entire amount if DCCU can prove that you:

- \* Voluntarily permitted your ART PIN to come into the possession of the person who made or caused the unauthorized use.

#### **Service Charges**

There are no service charges to make inquiries or fund transfers.

#### **Credit Union Liability**

If DCCU does not complete or stop a transaction authorized by you according to our agreement with you, we may be liable for your losses or damages. However, DCCU will not be liable if: (1) Through no fault of ours, your accounts do not contain enough funds to make the transaction; (2) The funds in your account are subject to legal process or other claim; (3) Circumstances beyond the reasonable control of DCCU, such as fire, flood, electrical failure, etc., prevented the completion of your transaction.

#### **Error Resolution Procedure**

If you think your statement is wrong or if you need more information, you should telephone us at the number provided herein, or write us at P.O. Box 1365, Waynesboro, VA 22980. We must hear from you no later than 60 days after we have sent the FIRST statement on which the problem or error appeared. Please provide us with the following information at the time of your inquiry:

- \* Your name and account number:

- \* Describe the error or transfer in question and explain as clearly as possible why you need more information;
- \* The dollar amount of the suspected error.

If you tell us orally, please send us your question or complaint in writing within 10 business days. We will inform you of the results of our investigation within 10 business days after we hear from you and will correct any error promptly. If we need additional time, we may take up to 45 days to further investigate your complaint or question. In this event, we will credit your account within 10 business days for the amount in question so that you will have use of the funds during the investigation period. We may not credit your account unless we receive your complaint or question in writing within 10 business days.

If our investigation reveals there was no error, we will send you a written explanation within 3 business days after we finish our investigation and debit your account for any provisional credit given. You may ask for copies of documents that we used in our investigation.

### **Right to Receive Documentation**

You will receive a monthly statement for each of your accounts that will include ART transactions. These statements may be used by you as admissible evidence of the transaction to which they relate.

### **Disclosure of Information**

We will disclose information on your account to third parties about your account or the transactions that are made:

1. When it is necessary to complete a transfer; or
2. To verify the existence or condition of your account for a third party such as a credit reporting agency; or
3. To comply with a government agency or court order; or
4. If you give us written permission.

### **Truth in Lending Disclosures**

DCCU ART permits you to access your line of credit account(s) under the terms previously disclosed for that credit feature.

### **Amendments and Terminations of This Agreement**

We may change the terms of this agreement without notice unless a change in the terms would result in increased fees or charges, increased liability for you, fewer types of electronic funds transfers, or limitations on the frequency or dollar amount of transfers. We will then mail or deliver a written notice to you at least 21 days before the effective date of such a change. Other changes which we must make immediately in order to maintain or restore the security of the electronic funds transfer system or your account will be made by us at any time without advance notice to you. If we make such change without advance notice to you, and it is to be made permanent, we will provide written notice of the change to you with your next scheduled periodic statement or within 30 days, unless that disclosure would jeopardize the security of our system or your account. All notices provided will be sent to you at your last known address as indicated on our records.

We may terminate this agreement for any reason. If we do, you will receive written notice.

You may cancel this agreement by giving us written notice. We will suspend your ART privileges on all your accounts within 2 business days after we receive the notice.

**To Call ART:  
540-946-3200, option 1 or 1-800-245-8085, option 1**