Address Change Request

Instructions

You can change your address by logging into your account through digital banking. Click on your profile in the upper right, select Settings, then click Contact to update your address. Within the mobile app, click on the More menu, tap Settings, then click Contact.

You can also visit a Salal branch or call our Virtual Branch at **800.562.5515** or **206.298.9394** (M–F: 9:30 a.m.–5:30 p.m. PT; Sat: 10 a.m.–2 p.m. PT).

Or you can fill out this form, sign, and return it via any of the methods below. If returned to us by mail or fax, you must send **a photocopy of your current, signed photo ID**. Please allow 2 business days for processing once we receive your signed request. **Changes can not be made without your signature**.

- Fax signed form and photocopy of current, signed photo ID to **206.298.3495**.
- Mail signed form and photocopy of current, signed photo ID to **Salal Credit Union, PO Box 75029, Seattle, WA 98175-0029**.

Member Name: _____ Member Number(s): _____

Additional Member Name(s) with Same Address: _____
(Minors and special accounts only. Joint members will need to submit their own Address Change Request form.)

New Physical Address

Street Address: _____

Apt, Unit, or Suite: _____ City: _____ State: _____ Zip Code: _____

New Mailing Address *(If different than physical)*

Street Address: _____

Apt, Unit, or Suite: _____ City: _____ State: _____ Zip Code: _____

Temporary Address Begin Date: _____ End Date: _____

New Contact Information

Home Phone: _____ Work Phone: _____ Ext. _____ Cell Phone: _____

Email: _____

Signature: _____ Date: _____

CREDIT UNION USE ONLY

Method of Request:

In Person   Phone   Mailed/Faxed

Steps Completed:

Episys updated.   Verified ID per procedures.   Business Accounts? Email Business Services.

Mortgage Loans? Email DL Mortgage Servicing.   Individual Retirement Accounts (IRA)? Submit a ticket per procedure.

Once completed, scan form into Synergy.

Comments: _____ Branch/Dept.: _____

Employee Name: _____ Teller Number: _____