



Account Authorization Update Form

Entity: _____

CSAFE Account Number(s): _____

Account Additions – Please complete this section to add individuals to your CSAFE account. Full website access allows the individual to execute transactions and approve account changes. Limited website access allows the individual to view and print account information only. Account Signers can approve changes to the account and request transactions, but will not have portal access.

Name: _____	Signature: _____	Phone: _____	<u>Access</u> (please select one)
Title: _____	E-mail: _____	Fax: _____	FULL/SIGNER
			LIMITED/VIEW ONLY
			ACCOUNT SIGNER ONLY (NO WEB ACCESS)
Name: _____	Signature: _____	Phone: _____	<u>Access</u> (please select one)
Title: _____	E-mail: _____	Fax: _____	FULL/SIGNER
			LIMITED/VIEW ONLY
			ACCOUNT SIGNER ONLY (NO WEB ACCESS)
Name: _____	Signature: _____	Phone: _____	<u>Access</u> (please select one)
Title: _____	E-mail: _____	Fax: _____	FULL/SIGNER
			LIMITED/VIEW ONLY
			ACCOUNT SIGNER ONLY (NO WEB ACCESS)

Account Deletions - Please complete this section to remove individuals from your CSAFE account.

Name: _____	Title: _____
Name: _____	Title: _____
Name: _____	Title: _____

Authorized Signature:

Printed Name:

Date:

Please e-mail the completed form to CSAFE csafe@csafe.org and allow 24 hours for processing. If you have any questions, please call 800-541-2953.