



**BAY CITIES CREDIT UNION**  
**VISA ACCOUNT UPDATE/CHANGE FORM**



Existing Primary Members may use this form to make changes to their Visa Account, report lost or stolen cards, order replacement cards, and add or delete joint members to the account.

Complete only the applicable portions of the form, and then **fax to us at 510-881-8509 or mail to: Bay Cities Credit Union, PO Box 30, Hayward, CA 94543.**

MEMBER NAME \_\_\_\_\_

MEMBER NUMBER \_\_\_\_\_

VISA CARD NUMBER \_\_\_\_\_

**REQUEST TYPE**

Lost or Stolen Visa

DATE LOST OR STOLEN \_\_\_\_\_

DATE & AMOUNT OF LAST CHARGE \_\_\_\_\_

Order Replacement Visa

Member

Joint Owner/Co-Applicant

Block Existing Visa

Lost

Stolen

Member

Loan Dept.

Collections

Reorder Visa PIN

Member

Joint Owner/Co-Applicant

Copy Request

TRANSACTION DATE \_\_\_\_\_

AMOUNT \_\_\_\_\_

REFERENCE # \_\_\_\_\_

Remove Co-Applicant

NAME \_\_\_\_\_

Add the Following User(s) NAME(S) \_\_\_\_\_

Order Cards for New User(s)

MEMBER SIGNATURE \_\_\_\_\_

MEMBER NUMBER \_\_\_\_\_

DATE \_\_\_\_\_

EMPLOYEE # \_\_\_\_\_

DATE \_\_\_\_\_

Note 00 on screen

FOR EMPLOYEE USE ONLY

**Questions?** Call 510-690-6100 or email us at [info@baycities.org](mailto:info@baycities.org).

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