Request/manage Visa® Debit card



Use this form to order a new or replacement Visa Debit card or change your PIN. Enter your information clearly using blue or black ink.

1.	Your Information							
	Name of primary account holder	Security code (If left	Security code (If left blank, your request could be delayed)					
	Debit card number or account number							
	Address	City	State	ZIP				
	Home phone	Email						
2.	Request a new Visa Debit card							
	There is a 2-card limit per account.							
	New card request for primary account holder	r						
	New card request for joint account holder							
	Name to appear on card Name to appear on card							
	Choose your pin							
	Please indicate the 4-digit confidential PIN you wish assigned to your card(s). Note: PINs may be changed after receipt of card(s).							
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	4-digit PIN	h assigned to your card(s). Note: Pli	Ns may be changed afte	receipt of card(s				
3.		h assigned to your card(s). Note: Pl	Ns may be changed afte	receipt of card(s				
3.	4-digit PIN							
3.	4-digit PIN Change your pin							
	4-digit PIN Change your pin Please indicate the 4-digit confidential PIN you wis	h assigned to your card(s). Note: Pll						
	4-digit PIN Change your pin Please indicate the 4-digit confidential PIN you wis 4-digit PIN Request replacement debit card	h assigned to your card(s). Note: Pll nt holder						
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	4-digit PIN Change your pin Please indicate the 4-digit confidential PIN you wis 4-digit PIN Request replacement debit card Replacement card request for primary account Replacement card request for joint account has the requesting a replacement card(s), indicate the	h assigned to your card(s). Note: Pli nt holder older	Ns may be changed afte					
	4-digit PIN Change your pin Please indicate the 4-digit confidential PIN you wis 4-digit PIN Request replacement debit card Replacement card request for primary account Replacement card request for joint account has the requesting a replacement card(s), indicate the	h assigned to your card(s). Note: Pli nt holder older	Ns may be changed afte					

5. Agreements and certifications

By signing section 6, opening or otherwise using an EverBank Visa Debit card, I understand and agree that EverBank, National Association ("EverBank") will rely on the veracity and completeness of the information on this form in opening or making the requested account(s) changes. I hereby certify that the information provided on this form and any accompanying documentation is true, complete, and accurate and that I will notify EverBank of any material change in such information or statements. I agree/understand and certify to EverBank that:

I have read and agree to be bound by the terms and conditions of the account as set forth in the Personal Account Terms, Disclosures and Agreements Booklet, the Deposit Account Fee Schedule, and any other disclosures or addenda related to the accounts or services I have requested on this form, and to which I give my consent to EverBank opening and/or providing, each of which may be amended from time to time.

Instructions for you/your responsibilities: EverBank is entitled to act upon instructions received through the use of your debit card with your Personal Identification Number (PIN), without inquiry into the validity of the transaction or the identity of the person using that card or PIN. However, you agree that you will not, under any circumstances, disclose your PIN by telephone or any other means to any person. You acknowledge that no person from EverBank will ever ask for your PIN, and that our employees do not need and should not ask for your PIN. You agree never to provide your PIN to anyone, including anyone claiming to represent EverBank. You are liable for all transactions made or authorized using your card or PIN.

You agree that if you give your card or PIN to anyone or fail to safeguard its secrecy, you do so at your own risk. Anyone with your card and/or PIN will have access to your accounts. You agree to notify EverBank immediately in the event your card or PIN is lost, stolen, or otherwise compromised. At any time, you may ask EverBank to disable your card and issue a new one to you. There may be a fee for any new card as disclosed on your Deposit Account Fee Schedule.

6. Signature(s)

A signature is required for each account holder requesting a card.

	The undersigned agrees that we, EverBank, in our sole discretion, may accept documents that you have signed and sent to
	us by electronic means, like fax, email, or other file transmittal processes we might offer. By sending us any such document by
	electronic means, the undersigned agrees that we may rely on it and on the signature, and that the document is binding on the
	signer even if the original signed document is not delivered to us.
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Primary account holder	Date
Joint account holder	Date

7. Submit

Upload this form and any additional documentation so that we can move forward in the quickest and most secure way. Simply log in to your account at everbank.com and:

- Navigate to the Document Center
- Select the Document Upload tab
- Select the files you would like to upload
- Review and accept the Terms and Conditions before uploading documents

For bank use only:	only:					
	Verify client		Date v	erified	FC number	Associate name (Print first & last name)
	Card issued has:	same card num	ber	new card	d number	