



Credit Union

Form B – Detailed Owner Information

(Fill one form out for each inactive deposit being submitted by mail.
If you are submitting more than 10 deposits, please use the appropriate
spreadsheet provided on the BCUPS website:
<http://www.unclaimedpropertybc.ca>).

Questions? Contact the BCUPS office: 604-662-3518 or Toll free: 1-888-662-2877

Account Holder Name(s) (First Middle Last):			
Last known mailing address (Example: 12-123 Anywhere St, Vancouver, BC V1V 1V1)			
Phone #:		Email:	
SIN (if available):		DL #:	
Date of birth (YYYY-MM-DD) (if available):		Right of survivorship? Y/N	
Bank #:		Transit #:	
Account #:		Membership #:	
Date of last transaction (YYYY-MM-DD):		Balance \$:	
Description of reasonable efforts made to locate the owner (i.e. 10-yr notice date, etc.):			

Please attach any supporting documentation that will assist our office in matching an owner with their unclaimed property (i.e. signature card, etc.).