

NEW ACCOUNT APPLICATION

IMPORTANT ACCOUNT OPENING INFORMATION: Federal law requires us to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

Type of Account Applying for _____ Purpose of Account Consumer Business
 Who Recommended Us to You? _____

ATM CASH CARD REQUEST

Number of Cards Requested _____ PIN # _____
 Number of Cards Received _____ Checking Account No. _____
 Savings Account No. _____

PIN # _____
 (Caution: For security reasons do not select your SSN, Date of Birth or other separately discoverable number as the PIN.)

FOR INSTITUTION USE

Date _____
 Account No. _____
 Approved By _____
 Declined By _____

OWNERSHIP OF ACCOUNT

Not all forms of ownership may be allowed in your state. Check with your financial institution.

Individual Joint - With Survivorship Joint - No Survivorship
(and not as tenants in common) (as tenants in common)

Revocable Trust or Pay-On-Death Beneficiary

Name _____
 Address _____
 Name _____
 Address _____

Unincorporated Nonbusiness Association of Individuals
 Sole Proprietorship Partnership Limited Liability Company
 Corporation: For Profit Not For Profit

Business _____

County and State
 of Organization: _____

Separate Authorization Received Yes No Facsimile Signature Yes No

TYPE OF ACCOUNT

Checking Savings
 Money Market CD
 NOW

Initial Deposit \$ _____
 Cash Check No. _____
 Additional Information _____

INDIVIDUAL APPLICANT INFORMATION

Name (Last, First, Middle)			Social Security No.		
Birth Date / /		Home Telephone No. ()		Driver's Lic. No. / Passport No., Issuer, Issue Date, Exp. Date	
Present Address (Street, City, State & Zip)			Do You <input type="checkbox"/> Own or <input type="checkbox"/> Rent		County
					How Long
Permanent Address			County		How Long
Employer					How Long
Address			Position/Title		Telephone No. ()
Previous Employer (If Current Employer is Less Than _____ Years)					How Long
Address			Position/Title		Telephone No. ()
Name and Address of Nearest Relative Not Living With You			Relationship		Telephone No. ()

JOINT APPLICANT INFORMATION

Name (Last, First, Middle)		Social Security No.		Relationship	
Birth Date / /		Telephone No. ()		Driver's Lic. No. / Passport No., Issuer, Issue Date, Exp. Date	
Address (Street, City, State & Zip)					
Employer					How Long
Address			Position		Telephone No. ()
Name and Address of Nearest Relative Not Living With You			Relationship		Telephone No. ()

FINANCIAL INSTITUTION RELATIONSHIPS

Name of Financial Institution and Address	Type of Account

BANK OR OTHER CREDIT CARDS

Company	Account No.	Credit Limit	Balance

BACKUP WITHHOLDING CERTIFICATIONS

- TAXPAYER I.D. NUMBER** - My correct taxpayer identification number is: _____
- APPLIED-FOR TAXPAYER I.D. NUMBER** - A taxpayer identification number has not been issued to me, and I mailed or delivered an application to receive a taxpayer identification number to the appropriate Internal Revenue Service Center or Social Security Administration Office (or I intend to mail or deliver an application in the near future). I understand that if I do not provide a taxpayer identification number to the payor within 60 days, the payor is required to withhold the percentage allowed under the Internal Revenue Code of all reportable payments thereafter made to me until I provide a number.
- EXEMPT RECIPIENTS** - I am an exempt recipient under the Internal Revenue Service Regulations. (See below.)
- BACKUP WITHHOLDING** - I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding.
- NONRESIDENT ALIENS** - A separate certification has been or will be completed.

SIGNATURE: I certify under penalties of perjury the statements checked in this section and that I am a U.S. person (including a U.S. resident alien).

DATE _____

Payees Exempt from Backup Withholding

We are **not required** to backup withhold if the payee is:

- ◆ An organization exempt from tax under section 501(a) or an individual retirement plan.
- ◆ The United States or any of its agencies or instrumentalities.
- ◆ A state, the District of Columbia, a possession of the United States, or any of their political subdivisions, or instrumentalities.
- ◆ A foreign government or any of its political subdivisions, agencies, or instrumentalities.
- ◆ An international organization or any of its agencies or instrumentalities.
- ◆ A futures commission merchant registered with the Commodity Futures Trading Commission.
- ◆ A real estate investment trust.
- ◆ An entity registered at all times during the tax year under the Investment Company Act of 1940.
- ◆ A common trust fund operated by a bank under section 584(a).
- ◆ A financial institution.
- ◆ A middleman known in the investment community as a nominee or custodian.
- ◆ A trust exempt from tax under section 664 or described in section 4947.
- ◆ Payments of **interest** not generally subject to backup withholding include the following:
 - ◆ Payments of interest on obligations issued by individuals. **Note:** You may be subject to back-up withholding if this interest is \$600 or more and is paid in the course of the payer's trade or business and you have not provided your correct taxpayer identification number to the payer.
 - ◆ Payments of tax-exempt interest (including exempt interest dividends under section 852). Payments described in section 6049(b)(5) to nonresident aliens.
 - ◆ Payments on tax-free covenant bonds under section 1451.
 - ◆ Payments made by certain foreign organizations.
 - ◆ Payments of mortgage or student loan interest. Payments that are not subject to information reporting are also not subject to backup withholding. For details, see the regulations under sections 6041, 6041A, 6045, 6050A, and 6050N.

Other payees that **may be exempt** from backup withholding include:

- ◆ A corporation.
- ◆ A foreign central bank of issue.
- ◆ A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States.

SIGNATURES

The undersigned acknowledge(s) receipt of a copy of and agree(s) to the terms of the following disclosure(s):

- Truth in Savings Electronic Funds Transfer Funds Availability Privacy _____

I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved. By signing below I authorize you to check my credit account and employment history and/or have a credit reporting agency prepare a credit report on me, as an individual. I also authorize you to answer questions others may ask you about my credit record with you. I understand that I must update credit information at your request if my financial condition changes.

Additional Authorized Signatories

Applicant's Signature _____	Date _____
Joint Applicant's Signature _____	Date _____
Joint Applicant's Signature _____	Date _____
Joint Applicant's Signature _____	Date _____

Signature _____	Relationship/Title _____
Signature _____	Relationship/Title _____