



PERSONAL ACCOUNT APPLICATION

ACCT #: _____ BRANCH #: _____ DATE: _____

DEPOSIT AMOUNT: \$ _____ SOURCE OF FUNDS (new, transfer, etc): _____

ACCOUNT TITLE: _____

- ACCOUNT TYPE: [] INDIVIDUAL, [] JOINT, [] TRUST, [] CUSTODIAN, [] OTHER
[] JUST CHECKING, [] FLEXIBLE CHECKING, [] FLEX GOLD/PLATINUM CHECKING, [] PERSONAL MONEY MARKET, [] YOUTH SAVINGS, [] STATEMENT SAVINGS, [] CERTIFICATE OF DEPOSIT, [] OTHER
CD INTEREST PAYMENT METHOD: [] ACCUMULATE, [] MAIL MONTHLY, [] MAIL QUARTERLY, [] CREDIT ACCT #, [] MONTHLY, [] QUARTERLY, [] OTHER

TAX ROLE:

NAME: _____ SS#: _____

FIRST M.I. LAST

ADDRESS: _____ D.O.B: _____

STREET (APT#)

EMPLOYER: _____

CITY STATE ZIP

HOME PHONE #: () WORK PHONE #: ()

INTERNET CUSTOMER? (Y/N): _____ EMAIL ADDRESS: _____

PERSONAL I.D.: _____ DEBIT CARD (Y/N) _____

TYPE (driver's license) NUMBER (#)

NON-TAX ROLE:

NAME: _____ SS#: _____

FIRST M.I. LAST

ADDRESS: _____ D.O.B: _____

STREET (APT#)

EMPLOYER _____

CITY STATE ZIP

HOME PHONE #: () WORK PHONE #: ()

INTERNET CUSTOMER? (Y/N): _____ EMAIL ADDRESS: _____

PERSONAL I.D.: _____ DEBIT CARD (Y/N) _____

TYPE (driver's license) NUMBER (#)

OPENED BY _____ DATE _____ REVIEWED BY _____ DATE _____

NON-TAX ROLE:

NAME: _____ **SS#:** _____
FIRST M.I. LAST

ADDRESS: _____ **D.O.B.:** _____
STREET (APT#)

CITY STATE ZIP **EMPLOYER**

HOME PHONE #: () **WORK PHONE #:** ()

INTERNET CUSTOMER? (Y/N): _____ **EMAIL ADDRESS:** _____

PERSONAL I.D.: _____ **DEBIT CARD (Y/N)** _____
TYPE (Driver's license) NUMER

NON-TAX ROLE:

NAME: _____ **SS#:** _____
FIRST M.I. LAST

ADDRESS: _____ **D.O.B.:** _____
STREET (APT#)

CITY STATE ZIP **EMPLOYER**

HOME PHONE #: () **WORK PHONE #:** ()

INTERNET CUSTOMER? (Y/N): _____ **EMAIL ADDRESS:** _____

PERSONAL I.D.: _____ **DEBIT CARD (Y/N)** _____
TYPE (driver's license) NUMBER

NON-TAX ROLE:

NAME: _____ **SS#:** _____
FIRST M.I. LAST

ADDRESS: _____ **D.O.B.:** _____
STREET (APT#)

CITY STATE ZIP **EMPLOYER**

HOME PHONE #: () **WORK PHONE #:** ()

INTERNET CUSTOMER? (Y/N): _____ **EMAIL ADDRESS:** _____

PERSONAL I.D.: _____ **DEBIT CARD (Y/N)** _____
TYPE (driver's license) NUMBER (#)
