

NEW ACCOUNT APPLICATION

Type of Account Applying for _____ Purpose of Account Consumer Business

Who Recommended Us to You? _____

ATM CASH CARD REQUEST

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

Number of Cards Requested _____ Checking Account No. _____

Number of Cards Received _____ Savings Account No. _____

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

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

Name (Last, First, Middle)	Relationship
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Birth Date / /	Telephone No.	Drivers License No.	Social Security No.
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Address (Street, City, State & Zip)

Employer	How Long
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Address	Position	Telephone No.
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Name and Address of Nearest Relative Not Living With You.	Relationship	Telephone No.
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FINANCIAL INSTITUTION RELATIONSHIPS

Table with 2 columns: Name of Financial Institution and Address, Type of Account

BANK OR OTHER CREDIT CARDS

Table with 4 columns: 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...
EXEMPT RECIPIENTS - I am an exempt recipient under the Internal Revenue Service Regulations...
BACKUP WITHHOLDING - I am not subject to backup withholding either because I have not been notified...
NONRESIDENT ALIENS - A separate certification has been or will be completed.

SIGNATURE: By signing below I certify under penalties of perjury the statements checked on this form.

DATE

Payees Exempt from Backup Withholding

Payees specifically exempted from backup withholding on ALL interest and dividend payments include the following:

- A corporation.
A financial institution.
An organization exempt from tax under section 501(a), or an individual retirement plan.
The United States or any agency or instrumentality thereof.
A State, the District of Columbia, a possession of the United States, or any subdivision or instrumentality thereof.
A foreign government, a political subdivision of a foreign government, or any agency or instrumentality thereof.
An international organization or any agency or instrumentality thereof.
A dealer in securities or commodities required to register in the U.S. or a possession of the U.S.
A real estate investment trust.
A common trust fund operated by a bank under section 584(a).
A futures commission merchant registered with the Commodity Futures Trading Commission.
An entity registered at all times under the Investment Company Act of 1940.
A foreign central bank of issue.
A middleman known in the investment community as a nominee or listed in the most recent Nominee List of the American Society of Corporate Secretaries.
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 backup 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.

SIGNATURES

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

- Truth in Savings Disclosure
Electronic Funds Transfer Disclosure
Funds Availability Disclosure

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. 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.

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

Additional Authorized Signatories
Signature Relationship/Title
Signature Relationship/Title