

# CONSUMER ACCOUNT APPLICATION

ACCOUNT TYPE, OWNERSHIP AND SERVICES			
Account Type / Product	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Form of Ownership</b>	<input type="checkbox"/> Joint No Survivorship (Tenants in Common)		<input type="checkbox"/> Other (describe below)
<input type="checkbox"/> Individual	<input type="checkbox"/> Payable on Death (POD) (Beneficiaries Page 2))		<input type="checkbox"/> Other (describe below)
<input type="checkbox"/> Joint with Survivorship (Joint Tenancy)	<input type="checkbox"/> Uniform Transfer to Minors Act (TUTMA)		<input type="checkbox"/> Other (describe below)
<b>Other Services</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

APPLICANT INFORMATION				
<input type="checkbox"/> New Customer <input type="checkbox"/> Existing Customer    Cust Number:				
Last Name	First Name, MI	Citizenship <input type="checkbox"/> US <input type="checkbox"/> Other	Social Security Number	Date of Birth
Street Address (Residence, No Post Office Boxes)		City	State	ZIP
Mailing Address (If Different from Street Address)		City	State	ZIP
Email Address	Telephone (Home)	Telephone (Work)	Telephone (Mobile)	
Employer		Occupation / Profession <input type="checkbox"/> Retired		
ID Security Question		ID Security Answer	Place of Birth	

CO-APPLICANT INFORMATION				
<input type="checkbox"/> New Customer <input type="checkbox"/> Existing Customer    Cust Number:				
Last Name	First Name, MI	Citizenship <input type="checkbox"/> US <input type="checkbox"/> Other	Social Security Number	Date of Birth
Street Address (Residence, No Post Office Boxes)		City	State	ZIP
Mailing Address (If Different from Street Address)		City	State	ZIP
Email Address	Telephone (Home)	Telephone (Work)	Telephone (Mobile)	
Employer		Occupation / Profession <input type="checkbox"/> Retired		
ID Security Question		ID Security Answer	Place of Birth	

**CERTIFICATIONS** Each of the undersigned certifies that all of the information provided in this application is true and correct as of the date below. The Bank is authorized, at its discretion, to verify any of the information provided in this application and to obtain third-party reports on the applicant(s) at any time. Untrue statements or misrepresentations may result in the termination of this account.

Applicant Signature <b>X</b>	Date
Co-Applicant Signature <b>X</b>	Date

**CUSTOMER IDENTIFICATION PROGRAM DISCLOSURE** To help the government fight the funding of terrorism and money laundering activities, federal law requires that all financial institutions obtain, verify, and record information which identifies each person who opens an account. When an account is opened by a new customer, we will request name, address, date of birth and other information which allows us verify identity. We may also require presentation of a driver's license, passport or other ID documents.

**TO OPEN A NEW ACCOUNT**, you must provide a taxpayer identification, social security or other identifying number and one of the identification documents listed below. Bank personnel may, at their discretion, request other documentation to resolve discrepancies, to verify identity, or to comply with regulatory recordkeeping requirements.

1. Current Texas or other State Driver's License or Photo ID Card
3. Current United States Military ID with photograph
2. Current U.S. or Other Passport
4. Permanent Resident Card, also referred to as a "Green Card"

Applicant(s)	Application Date
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**ACCOUNT PURPOSE AND ANTICIPATED TRANSACTION TYPES**

1. Anticipated use(s) of this account:     Personal / Household     Investments     Commercial / Business     Other
2. Is this account to be opened by an individual acting as a trustee, agent or representative for another person or organization?...     Yes     No
3. Will funds be wire transferred to or from this account from or to other U.S. financial institutions on a regular basis? .....     Yes     No
4. Will funds be wire transferred to or from this account **from or to foreign financial institutions** on a regular basis? .....     Yes     No
5. Will currency in amounts of \$5,000 or more be **deposited** in this account on a regular basis?.....     Yes     No
6. Will currency in amounts of \$5,000 or more be **withdrawn** from this account on a regular basis?.....     Yes     No
7. For applicants identified as non-U.S. citizens, citizenship or nationality:     Yes     No

**BENEFICIARIES** (Required for POD and IRA CD Accounts)

Name		Social Security Number	Relationship	P or C	%
Beneficiary 1 Street Address		City	State	ZIP Code	Date of Birth
Name		Social Security Number	Relationship	P or C	%
Beneficiary 2 Street Address		City	State	ZIP Code	Date of Birth
Name		Social Security Number	Relationship	P or C	%
Beneficiary 3 Street Address		City	State	ZIP Code	Date of Birth

**FOR BANK USE**

Account Number		Account Product		Initial Deposit Amount	Initial Deposit Method <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Other
ATM Limit	CheckCard Limit	OD Protection Limit	Consumer Rept Date	DAV Report By	Deposit Acct Verification Report Decision <input type="checkbox"/> Accept <input type="checkbox"/> Decline <input type="checkbox"/> Investigate
Opened By	Reviewed By	Branch	Officer	Consumer Report    Deposit Account Verification (DAV) Notes	

**Customer ID Verification – Applicant**

Identification Type	ID Number	Issued By	Issue Place	ID Issue Date	ID Expiration Date
CIP Verified By	CIP Date	CIP Discrepancies and Resolution (Indicate "None" if no discrepancies noted.)			
OFAC / Gvt List	List Date	BSA / AML / OFAC Risk Designation	PEP or Other HRC <input type="checkbox"/> Yes <input type="checkbox"/> No	Notes	

**Customer ID Verification – Co-Applicant**

Identification Type	ID Number	Issued By	Issue Place	ID Issue Date	ID Expiration Date
CIP Verified By	CIP Date	CIP Discrepancies and Resolution (Indicate "None" if no discrepancies noted.)			
OFAC / Gvt List	List Date	BSA / AML / OFAC Risk Designation	PEP or Other HRC <input type="checkbox"/> Yes <input type="checkbox"/> No	Notes	

Comments


Applicant(s)	Application Date
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Comments, Notes

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**ONLINE BANKING** Customers requesting online banking services authorize the Bank to establish internet access by authorized signers to all accounts covered by this application, except as otherwise specified in writing. Use of online banking services is governed by deposit account disclosure and such other terms and conditions, or amendments thereto, as may be established by the Bank and communicated to the customer, in writing. Account security is based on customer log-in ID and Personal Identification Number (PIN). A customer PIN must be changed the first time he or she logs in for online account access. Customers agree to protect the confidentiality of the log-in ID and PIN and to hold the Bank harmless in the event of unauthorized use or access. All information downloaded by customers becomes their personal property and their responsibility.

**PRIVACY** In the normal course of business, the Bank collects nonpublic personal information about deposit and loan customers. This includes the following:

- ❏ Information on account application forms and correspondence (name, address, social security number, income, etc.),
- ❏ Information about transactions by customers with the Bank or with other unaffiliated parties (account balances, payment histories, ATM card usage, etc.), and
- ❏ Information from a consumer reporting agency (credit history or creditworthiness, etc.)

The Bank provides information about customers to affiliate(s) or to unaffiliated third parties only when necessary to establish, administer or provide a product or service to such customers. When permitted or required by law, the Bank provides personal information to third parties, such as government entities, law enforcement agencies or consumer reporting agencies. The Bank will not disclose or sell personal information about customers to companies which perform marketing services. The Bank utilizes physical, electronic, and procedural security measures which comply with federal regulations to safeguard the nonpublic personal information of current and former customers. The Bank restricts access to personal information about customers to those Bank employees or agents who need to know such information in order to provide banking products or services. The Bank's employees have been trained on privacy laws and information security. The Bank has implemented disciplinary procedures for any employee who violates its privacy policies and procedures. Bank personnel strive to maintain complete and accurate information about customers and their relationships with the Bank. Customers with questions regarding the Bank's policies or records should notify our Customer Service Department.



**CUSTOMER IDENTIFICATION PROGRAM DISCLOSURE** To help the government fight the funding of terrorism and money laundering activities, federal law requires that all financial institutions obtain, verify, and record information which identifies each person who opens an account. When an account is opened by a new customer, we will request name, address, date of birth and other information which will allow us to identify such customer. We may also require presentation of a driver's license, passport or other identifying documents.



**IDENTITY THEFT AND FRAUD PREVENTION** The Bank has implemented policies, procedures and controls to ensure that, whenever possible, identity theft or fraud are prevented or detected promptly. If you initiate inquiries about, or changes to, your accounts, you will be required to confirm your identity by showing a government-issued picture ID or by providing answers to security questions created by you or by the Bank. If you suspect identity theft or other fraudulent activity, report it to the Bank as soon as possible. Please help us protect you by following the guidelines below.

1. Review all bank account statements promptly and reconcile them to your records. Check all credit card and loan account statements carefully, too.
2. Carry your social security card with you only when necessary. You seldom need it except in dealings with a government agency, an employer, an investment broker or a financial institution. Memorize and safeguard your social security number. Provide it to others only when truly necessary.
3. Do not put receipts, statements or correspondence with your account numbers, social security number or other sensitive personal information in trash or recycling bins – shred them.
4. If you must mail materials with your account numbers, social security number or other personal data, use a secured mailbox or go to a post office. Mail is often stolen to get such information.
5. Investigate any bill, statement, notice or other mail that refers to credit card, deposit, loan or other accounts in your name which you do not recognize. Do not ignore them; notify the issuer promptly to clear up any confusion and avoid fraud losses.
6. Never provide your account numbers, social security number or other sensitive personal information over the phone or on the internet unless you can confirm the identity of the party who will receive it and verify that the need for such information is legitimate. Be very skeptical about requests for social security or account numbers.
7. Obtain a **FREE** copy of your credit report each year from each of the major consumer credit reporting agencies (your right, by law). Review the reports closely to make sure no one has opened a fraudulent account in your name. Check to see who is requesting your credit history. Verify that there is no incorrect information in your credit history. Call 1-877-322-8228 or visit [www.AnnualCreditReport.com](http://www.AnnualCreditReport.com).