



PERSONAL APPLICATION

Important information about procedures for opening a new account as required by the USA PATRIOT ACT. To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. **MEMBER FDIC**

APPLICATION INFORMATION

Legal Name (First, Middle, Last) _____ Preferred Name _____

Birth Date _____ SSN _____ Website Address _____
mm/dd/yyyy

Cell Phone _____ Home Phone _____ Work Phone _____

Email Address _____

Physical Address (no PO Boxes) _____

City _____ State _____ Zip _____ County _____

Mailing Address (if different) _____

City _____ State _____ Zip _____ County _____

Previous Address if less than 5 years _____

ID Type: DL Passport State ID Other _____ State/Country of Issuance _____

ID Number _____ Issue Date _____ Exp. Date _____
mm/yyyy mm/dd/yyyy

Current Employer _____ Occupation _____
If retired or Unemployed, what was your occupation

Please complete and sign

Security Code for Identification _____ Hint Phrase _____
Max of 12 characters Helpful reminder if security code is forgotten

Preferred Method of Contact? PHONE MAIL EMAIL Would you like Mobile Deposit? YES NO

Would you like Online Banking? YES NO Would you like E-Statements? YES NO

I hereby authorize New Market Bank to obtain a consumer report that relates to this application.

I certify that everything I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. I understand if the information requested is not provided within 30 days, my account may be closed.

Applicant Signature _____ Date _____