

Personal Deposit Account Application
Checking, Savings, Money Market, or Certificate of Deposit

Account Title - Name of Trust (if applicable)					
Account Owner			Account Owner		
First Name	Middle	Last	First Name	Middle	Last
SSN/TIN		DOB (mm/dd/yyyy)	SSN/TIN		DOB (mm/dd/yyyy)
Physical Address (No P.O. Box Address)			Physical Address (No P.O. Box Address)		
Mailing Address (if different than physical address)			Mailing Address (if different than physical address)		
Home Phone		Cell Phone	Home Phone		Cell Phone
Email Address (required if requesting online account access)			Email Address (required if requesting online account access)		
Identification (Government issued driver's license, State ID, or Passport)			Identification (Government issued driver's license, State ID, or Passport)		
Issuer	Type	Number	Issue/Expiration Date	Issuer	Type
Employment			Employment		
Employer Name (if retired list your last occupation)			Employer Name (if retired list your last occupation)		
Work Phone Number/Extension			Work Phone Number/Extension		
If you would like to designate any Beneficiaries on this account list below:					
Beneficiary 1 Name and address			Social Security No.		Date of Birth
Beneficiary 2 Name and address			Social Security No.		Date of Birth
Select the type of account(s) you wish to open					
<input type="checkbox"/> Simple Checking	<input type="checkbox"/> 50+ Checking	<input type="checkbox"/> Super Now Account	<input type="checkbox"/> Money Market		
<input type="checkbox"/> Premium Checking	<input type="checkbox"/> NOW Account	<input type="checkbox"/> Savings	<input type="checkbox"/> Certificate of Deposit		
Additional Services					
<input type="checkbox"/> ATM/Debit Card		<input type="checkbox"/> Online Banking			
Signatures					
Each of the undersigned Applicant(s) identified hereby agrees and certifies that all the information on this Application is true and correct to the best of his/her knowledge. Each applicant also authorizes the Bank to verify the employment and/or credit history of each of the undersigned as the Bank deems necessary.					
X _____			_____		
Applicant			Date		
X _____			_____		
Co-Applicant			Date		
Uniform Single-Party or Multiple-Party Account Selection Form must accompany your application. Verification of Identification and Signatures will be required before account can be opened. Also See Account Document Checklist.					

UNIFORM SINGLE-PARTY OR MULTIPLE-PARTY ACCOUNT SELECTION FORM NOTICE

INSTRUCTIONS: The type of account you select may determine how property passes on your death. Your will may not control the disposition of funds held in some of the following accounts. You may choose to designate one or more convenience signers on an account. A designated convenience signer may make transactions on your behalf during your lifetime, but does not own the account during your lifetime. The designated convenience signer owns the account on your death only if the convenience signer is also designated as a P.O.D. payee.

Select one of the following accounts by placing your initials to the left of the account you selected:

- _____ (1) SINGLE-PARTY ACCOUNT WITHOUT "P.O.D." (PAYABLE ON DEATH) DESIGNATION. The party to the account owns the account. On the death of the party, ownership of the account passes as a part of the party's estate under the party's will or by intestacy.

Enter the name of the party:

Enter the name(s) of the convenience signer(s), if you want one or more convenience signers on this account:

- _____ (2) SINGLE-PARTY ACCOUNT WITH "P.O.D." (PAYABLE ON DEATH) DESIGNATION. The party to the account owns the account. On the death of the party, ownership of the account passes to the P.O.D. beneficiaries of the account. The account is not a part of the party's estate.

Enter the name of the party:

Enter the name or names of the P.O.D. beneficiaries:

Enter the name(s) of the convenience signer(s), if you want one or more convenience signers on this account:

- _____ (3) MULTIPLE-PARTY ACCOUNT WITHOUT RIGHT OF SURVIVORSHIP. The parties to the account own the account in proportion to the parties' net contributions to the account. The financial institution may pay any sum in the account to a party at any time. On the death of a party, the party's ownership of the account passes as a part of the party's estate under the party's will or by intestacy.

Enter the names of the parties:

Enter the name(s) of the convenience signer(s), if you want one or more convenience signers on this account:

- _____ (4) MULTIPLE-PARTY ACCOUNT WITH RIGHT OF SURVIVORSHIP. The parties to the account own the account in proportion to the parties' net contributions to the account. The financial institution may pay any sum in the account to a party at any time. On the death of a party, the party's ownership of the account passes to the surviving parties.

Enter the names of the parties:

Enter the name(s) of the convenience signer(s), if you want one or more convenience signers on this account:

- _____ (5) MULTIPLE-PARTY ACCOUNT WITH RIGHT OF SURVIVORSHIP AND P.O.D. (PAYABLE ON DEATH) DESIGNATION. The parties to the account own the account in proportion to the parties' net contributions to the account. The financial institution may pay any sum in the account to a party at any time. On the death of the last surviving party, the ownership of the account passes to the P.O.D. beneficiaries.

Enter the names of the parties:

Enter the name or names of the P.O.D. beneficiaries:

Enter the name(s) of the convenience signer(s), if you want one or more convenience signers on this account:

I acknowledge that I have read each paragraph of this Notice, and placed my initials to the left of the account type that I want.

Customer's Signature

Customer's Signature

Customer's Signature

Customer's Signature

Date

For Bank Use Only:

Account Number _____



Account Document Checklist

Please help us provide you with the best possible service. Bring the following items with you:

Sole Proprietors		Trust	
	Social Security Number		Trust EIN or SSN of Grantor
	DBA filed with County Clerk - Business License (if applicable)		Trust Agreement
Limited Liability Company			
	Taxpayer Identification Number - EIN		
	Certificate of Formation filed with the Secretary of State		
	Certificate of Filing issued by Secretary of State		
	Company Operating Agreement		
	Assumed Name Certificate (if applicable) filed with the Secretary of State		
	Certificate of Registration for Out of State LLC (if applicable)		
	LLC Resolution – bank provided form		
Corporation (For Profit and Non-Profit)			
	Taxpayer Identification Number - EIN		
	Certificate of Incorporation/Formation/Filing issued by the Secretary of State		
	Corporate Bylaws - Articles of Incorporation		
	Assumed Named Certificate (if applicable) filed with the Secretary of State		
	Certificate of Registration for Out of State Corporation (if applicable) filed with the Secretary of State		
	IRS form 501 (C-3 – etc.) for Non-Profits only		
	Corporate Resolution - bank provided form		
Partnership			
	Taxpayer Identification Number - EIN		
	Assumed Name Certificate filed with County Clerk		
	Partnership Agreement		
	Resolution – bank provided form		
Limited Partnership and Limited Liability Partnership			
	Taxpayer Identification Number - EIN		
	For LP= Certificate of Limited Partnership Formation / For LLP=Registration as LLP Issued by the Secretary of State		
	Partnership Agreement		
	Assumed Named Certificate (if applicable) filed with the Secretary of State		
	Certificate of Registration for Out of State LLP/LP (if applicable)		
	Resolution – bank provided form		
Professional Association (PA)			
	Taxpayer Identification Number- EIN		
	Certificate of Formation Professional Association/ Articles filed with and issued by the Secretary of State		
	Assumed Name Certificate (if applicable)		
	Certificate of Registration for Out of State PA (if applicable)		
Unincorporated – Incorporated Non-Profit Association / Clubs and Civic Organizations			
	Taxpayer Identification Number -EIN		
	Minutes of meeting authorizing the account opening and stating who is authorized to open the account		
	Certificate of filing for Incorporated Nonprofit Association with Secretary of State		
	Bylaws or Charter		
	Resolution – bank provided form		
IOLTA		Estate	
	EIN of Equal Justice Foundation		Taxpayer Identification Number - EIN of the Estate
	Texas Access to Equal Justice Foundation –Notice form		Death Certificate
			Letters of Testamentary or Letters of Administration
Personal Accounts: proof of name, address, date of birth and SSN			
For each account owner and convenient signer please bring with you: Unexpired Government issued photo identification and another ID (SSN card preferred). If the physical address on your photo ID is not current, you must provide another document with proof of current address. Some examples of acceptable photo IDs: Driver's License, State Issued ID, Handgun License, Passport.			