

Atlantic South Bank

A Division of Wheeler County State Bank

ACCOUNT APPLICATION

PROCEDURE FOR OPENING A NEW ACCOUNT

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.

DATE: _____

NAME: _____

DOB: _____

SSN: _____

DL# _____

ISSUE DATE/EXP: _____

HOME: _____

BUSINESS PHONE: _____

CELL PHONE: _____

EMAIL: _____

CURRENT **PHYSICAL** ADDRESS: _____

****REQUIRED****

CITY: _____ STATE: _____ ZIP: _____

NO. OF YEARS AT PRESENT ADDRESS _____

MAILING ADDRESS IF DIFFERENT _____

CITY: _____ STATE: _____ ZIP: _____

EMPLOYED AT _____

___ SMART CHOICE FREE ___ SMART CHOICE ETA ___ CD/IRA

___ SMART CHOICE 55 ___ STATEMENT SAVINGS ___ SAFE DEP. BOX

___ SMART CHOICE INTEREST ___ MONEY MARKET

I/WE AUTHORIZE ATLANTIC SOUTH BANK TO ACQUIRE A CREDIT REPORT BEFORE OPENING THIS ACCOUNT.

SIGNATURE(S): _____

*****BANK USE*****

DATE APPROVED / DENIED: _____ BY: _____ ACCT. # _____

DEPOSIT AMOUNT: \$ _____ BY CHECK / CASH / TRANS ACCT# _____