

# 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. DATE: \_\_\_\_\_

CURRENT PHYSICAL ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

NO. OF YEARS AT PRESENT ADDRESS \_\_\_\_\_

TELEPHONE NO.: HOME \_\_\_\_\_ WORK \_\_\_\_\_

EMPLOYED AT \_\_\_\_\_

\_\_\_\_ SMART CHOICE FREE      \_\_\_\_ STATEMENT SAVINGS      \_\_\_\_ CD/IRA  
\_\_\_\_ SMART CHOICE 55      \_\_\_\_ MONEY MARKET      \_\_\_\_ SAFE DEP. BOX  
\_\_\_\_ SMART CHOICE INTEREST      \_\_\_\_ CD/IRA

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

SIGNATURE: \_\_\_\_\_

\*\*\*\*\*BANK USE\*\*\*\*\*

DATE APPROVED / DENIED: \_\_\_\_\_ BY: \_\_\_\_\_ ACCT. # \_\_\_\_\_

DEPOSIT AMOUNT: \$ \_\_\_\_\_ BY CHECK / CASH