

Account Number \_\_\_\_\_ Date: \_\_\_\_\_

\*Required Prior to Account Opening

**New Account Application - (Consumer)**

\*Legal Name (as appears on Driver's License) \_\_\_\_\_

\*Physical Address \_\_\_\_\_

\*Mailing Address (if different) \_\_\_\_\_

\*Previous Address (if less than 2 years at current address) \_\_\_\_\_

\*Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

\*U.S. Person - SS # \_\_\_\_\_ \*Date of Birth \_\_\_\_\_ Email \_\_\_\_\_

DL \_\_\_\_\_ Issued \_\_\_\_\_ Expires \_\_\_\_\_  
 (ST) (Number)

FRSB Password \_\_\_\_\_ (This password will be used to verify your identity when you call in.)

Current Employer: \_\_\_\_\_ Phone \_\_\_\_\_

Occupation (If retired still need past occupation): \_\_\_\_\_

Nearest relative not living with you \_\_\_\_\_ Relation \_\_\_\_\_

Address \_\_\_\_\_ City/St \_\_\_\_\_ Phone \_\_\_\_\_

Payable On Death -  Yes or  No POD Name \_\_\_\_\_ Relationship \_\_\_\_\_ SS# \_\_\_\_\_

POD Contact Information- Address \_\_\_\_\_ Phone # \_\_\_\_\_

Additional POD Name \_\_\_\_\_ Relationship \_\_\_\_\_ SS# \_\_\_\_\_

POD address \_\_\_\_\_ Phone # \_\_\_\_\_

**\*Please Indicate Status:**      **U.S. Citizen**                      **Resident Alien**                      **Non-Resident Alien (W8BEN)**

**Provide one or more of the following:**

Tax payer ID # \_\_\_\_\_ Passport # / Country of Issuance \_\_\_\_\_  
 (Must be government issued, evidence nationality or residence and bear current photograph or similar safeguard)

Permanent address: \_\_\_\_\_ Host Family name \_\_\_\_\_

\_\_\_\_\_ Host Family Address \_\_\_\_\_

\_\_\_\_\_ Host Family Address \_\_\_\_\_

Country of Origin \_\_\_\_\_ Host Family phone # \_\_\_\_\_

As a full service community bank, we are committed to providing our customers with financial products and services that meet their needs. To assist us with determining whether the products and services you have selected are appropriate, please provide the following information:

**Anticipated Account Activity - (Estimate based on a one month statement)**

Deposits	<input type="checkbox"/> Cash <input type="checkbox"/> Check	Purchase Official Checks	<input type="checkbox"/> Yes <input type="checkbox"/> No
Withdrawals	<input type="checkbox"/> Cash <input type="checkbox"/> Check	Transfers (Telephone, AFT)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Wire Transfers	<input type="checkbox"/> Domestic <input type="checkbox"/> International	Currency Exchange	<input type="checkbox"/> Yes <input type="checkbox"/> No
ACH Credits	<input type="checkbox"/> Domestic <input type="checkbox"/> International	Frequent Traveler	<input type="checkbox"/> Yes <input type="checkbox"/> International <input type="checkbox"/> No
ACH Debits	<input type="checkbox"/> Domestic <input type="checkbox"/> International	Employee of an Embassy	<input type="checkbox"/> Yes <input type="checkbox"/> No
Online Banking	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Use Remote Deposit	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Politically Exposed Person	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Safe Deposit Box	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Debit/ATM Card	<input type="checkbox"/> Yes <input type="checkbox"/> No		

By signing this document, I authorize First Robinson Savings Bank, N.A. to verify all information provided, and, to obtain additional information regarding my personal financial history from a consumer-reporting agency or agencies and/or other financial institutions. I understand that this information will only be used in conjunction with First Robinson Savings Bank's products and services requested by me and that it will remain in force for the duration of my association.

I certify that the information provided by me is true and correct to the best of my belief.

X: \_\_\_\_\_

Customer Signature

Date

**-----For Internal Bank Use Only-----**

New Risk Code \_\_\_\_\_  CIF Info reviewed (no change)  CIF Info reviewed (updated)  Driver's License/ID Scanned  
 CSR \_\_\_\_\_