THE BANK OF SAN JACINTO COUNTY
PERSONAL NEW ACCOUNT APPLICATION

Customer Name * (Last, First, Middle):_____

U.S. Citizen? **Yes _____** **No _____** ***Mothers Maiden Name_____**

Social Security No.: (Taxpayer ID):_____

***Texas Driver's License No.:_____** **TDL Exp. Date_____**

Date of Birth * _____ **City of Birth*_____**

Street Address*_____

Mailing Address_____

Home Phone: _____ Work Phone: _____Cell Phone _____

Employer/Occupation: _____E-Mail Address_____

Bank References (within last 12 months):_____

TYPE OF ACCOUNT OPENING: _____ Checking _____ Savings _____ Safe Deposit Box _____ CD _____ LOAN

Have you had a transaction account closed by a financial institution without your consent within the last 12 months? YES _____ NO_____
If YES, please state reason:_____

Have you been convicted of a criminal offense because of the use of a check or other similar item within the last 24 months? YES_____NO_____

I certify that the foregoing statements are true and correct to the best of my knowledge. The Bank of San Jacinto County is authorized to check employment history and credit information, or any other information, whether or not contained on this form, to the extent it deems necessary in connection with this application. I acknowledge that this application is the property of The Bank of San Jacinto County, whether or not the account(s) is/are opened.

_____ _____
APPLICANT SIGNATURE DATE

Identification Obtained — Check at least **two,** one of which must be in the **first box:**

PRIMARY I.D. / NUMBER / EXPIRATION DATE		SECONDARY I.D. / NUMBER / EXPIRATION DATE	
( ) Texas Drivers' License No.:	Expiration Date:	( ) Social Security Card	( ) School or College Photo I.D.
( ) Texas I.D. Card No.:	Expiration Date:	( ) Utility Bill:	( ) Voter Registration Card
( ) Military or Govt. I.D. No.:	Expiration Date:	( ) Insurance I.D.	( ) Local Employment Photo I.D.
( ) Passport No.:	Expiration Date:	( ) Payroll Stub	( ) Other
( ) Alien Registration Card No.:	Expiration Date:	( ) Major Credit Card No.:	
Customer Port #: **Original CIP Date:**		Type: _____	Expiration: _____

Verification methods used—show date / initials. Discuss any discrepancies or negative results in the following section:

CHECK ONE	APPROVAL NUMBER OR CODE	DATE	INITIALS
( ) Compared to government lists * OFAC List			
( ) Verified Employment			
( ) Compared Identification Resources			
( ) Note to Physical Address			
( ) Completed Call to Telephone No.			
( ) Consumer Credit Report or Telecheck			
( ) Verified Employment			
( ) Checked Prior Bank Reference			
( ) Look Up on Internet Data Base			
( ) Look Up in Reverse Directory			

Discrepancies noted and method of resolution: _____

Form Completed By:_____ **Checked By:_____**

Complete back of form

(Revised) June 6, 2014