

****Savings Account Application Form****

****Applicant Information:****

1. Full Name: _____
2. Date of Birth: _____
3. Address: _____
City: _____
State: _____ Zip Code: _____
4. Phone Number: _____
5. Email Address: _____

****Identification:****

6. Social Security Number: _____
7. Government Issued ID Type (Driver's License/Passport): _____

ID Number: _____

Expiration Date: _____

****Account Preferences:****

8. Initial Deposit Amount: _____
9. Account Type (Basic/Special Savings): _____
10. Additional Services Required (Check all that apply):
- ☐ Online Banking
- ☐ Mobile Banking
- ☐ ATM Card
- ☐ Overdraft Protection

****Acknowledgment:****

11. I hereby declare that the information provided is accurate and consent to the terms and conditions of the savings account.

Signature: _____ Date: _____

****For Bank Use Only:****

12. Account Number: _____
13. Date of Account Opening: _____
14. Bank Representative Name: _____

****Comments:**
