



## Consumer Deposit Account Application

**USA PATRIOT ACT: Important information about 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.

**Primary Account Owner Information:**

Date Opened: \_\_\_\_\_

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address (Physical Address)\*: \_\_\_\_\_

*\*(Please note: PO Box holders must furnish physical address and mailing address)*

Mailing Address (PO Box): \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip + 4 \_\_\_\_\_ - \_\_\_\_\_

Tax ID No.(SSN) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_\_ ID Code: \_\_\_\_\_

Cell # \_\_\_\_\_ E-mail \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Employer \_\_\_\_\_ Work Address \_\_\_\_\_ How Long? \_\_\_\_\_

What is your occupation? \_\_\_\_\_

Drivers License Number \_\_\_\_\_ Issuing State/Entity \_\_\_\_\_

Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

Are you a United States Citizen?  Yes  No: \_\_\_\_\_

Are you a Resident Alien?  Yes  No: Country of Origin \_\_\_\_\_

Are you a Non-Resident Alien?  Yes  No Country of Origin \_\_\_\_\_

Previous banking accounts?  Yes  No

**If no co-owner on account, go to Section III.**

**Co-Owner Account Information:**

First Name \_\_\_\_\_ MI: \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address (Physical Address)\*: \_\_\_\_\_

*\*(Please note: PO Box holders must furnish physical address and mailing address)*

Mailing Address (PO Box): \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip + 4 \_\_\_\_\_ - \_\_\_\_\_

Tax ID No. (SSN) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_\_ ID Code: \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Employer \_\_\_\_\_ Work Address \_\_\_\_\_ How Long? \_\_\_\_\_

What is your occupation?) \_\_\_\_\_

Cell # \_\_\_\_\_ E-mail \_\_\_\_\_

Drivers License Number \_\_\_\_\_ Issuing State/Entity \_\_\_\_\_

Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

Are you a United States Citizen?  Yes  No

Are you a Resident Alien?  Yes  No; If yes, Country of Origin: \_\_\_\_\_

Are you a Non-Resident Alien?  Yes  No If yes, Country of Origin: \_\_\_\_\_

Previous bankingAccounts?  Yes  No

**Section III**

**SERVICES THAT YOU MAY BE INTERESTED IN: (Please check beside the service)**

**Deposits**

- \_\_\_\_ Non Interest Checking
- \_\_\_\_ Interest Bearing Checking
- \_\_\_\_ Student/Senior Accounts
- \_\_\_\_ Business Checking Account
- \_\_\_\_ Regular Savings Account
- \_\_\_\_ Money Market Account

**Lending**

- \_\_\_\_ Agricultural Loans
- \_\_\_\_ Commercial Loans
- \_\_\_\_ Real Estate Loans
- \_\_\_\_ Home Equity Loans
- \_\_\_\_ Vehicle Loans
- \_\_\_\_ Credit Card

**Other**

- \_\_\_\_ Online Banking
- \_\_\_\_ Bill Pay
- \_\_\_\_ Certificate of Deposits
- \_\_\_\_ Safe Deposit Boxes
- \_\_\_\_ Debit card

***The information I have provided is correct to the best of my knowledge. I authorize PVNB to check credit and/or employment history should it deem necessary.***

X \_\_\_\_\_ Date \_\_\_\_\_  
*(Signature of primary account holder)*

***The information I have provided is correct to the best of my knowledge. I authorize PVNB to check credit and/or employment history should it deem necessary.***

X \_\_\_\_\_ Date \_\_\_\_\_  
*(Signature of co-owner account holder)*

**FOR BANK USE:**

**Credit Bureau and OFAC Verified? Yes  Sanctioned Country Yes  No  Obtain identification for all account signers.**

Type of Account and Account Number: \_\_\_\_\_

How was the new account opened? \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_  
*(Bank name, Account Name, and number drawn on)*

Amount of Deposit: \_\_\_\_\_ Internal Transfer: \_\_\_\_\_ Account # \_\_\_\_\_ RIM Number \_\_\_\_\_

Special Instructions or comments:

Date Completed: \_\_\_\_\_ Account Opened by \_\_\_\_\_

Describe non-documentary verification methods used or any exceptions here:

\_\_\_\_\_



POWELL VALLEY  
NATIONAL BANK

