



**FARMERS &
MERCHANTS**
STATE BANK

Consumer Deposit Account Application- New Customer

Type of Account(s) you are interested in opening- please check appropriate box(es).

- Personal Checking F&M Advantage Now Account Savings COD
 Money Market Money Tree/ Junior Savings Christmas Club (existing account required)

APPLICANT INFORMATION:

Full Name: _____ SSN: _____ DOB: _____
 Primary Phone: _____ Secondary Phone: _____ E-mail: _____
 Mother's Maiden Name: _____
 Home Address: _____ City _____ State _____ Zip _____ Years: _____
 Previous Address: _____ City _____ State _____ Zip _____ Years: _____
 Driver's License #: _____ State Issued By: _____ Other ID: _____
 Applicant Present Employer: _____ Position: _____
 Employer's Address: _____ City _____ State _____ Zip _____
 Business Phone: _____ Years employed: _____ Are You A US Citizen? Yes No (If no, obtain IRS W-8)
 Previous/Current Bank: _____ Acct. Type: _____ Account #: _____
 Nearest relative not living with you: _____ Relationship: _____
 Address: _____ City _____ State _____ Zip _____ Phone: _____

JOINT APPLICANT INFORMATION:

Full Name: _____ SSN: _____ DOB: _____
 Primary Phone: _____ Secondary Phone: _____ E-mail: _____
 Mother's Maiden Name: _____
 Home Address: _____ City _____ State _____ Zip _____ Years: _____
 Previous Address: _____ City _____ State _____ Zip _____ Years: _____
 Driver's License #: _____ State Issued By: _____ Other ID: _____
 Applicant Present Employer: _____ Position: _____
 Employer's Address: _____ City _____ State _____ Zip _____
 Business Phone: _____ Years employed: _____ Are You A US Citizen? Yes No (If no, obtain IRS W-8)
 Previous/Current Bank: _____ Acct. Type: _____ Account #: _____
 Nearest relative not living with you: _____ Relationship: _____
 Address: _____ City _____ State _____ Zip _____ Phone: _____

Important Information About Procedures 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 you for your name, address, date of birth, and other information that will allow us to identify you. We may ask to see your driver's license or other identifying documents.

By signing below, you certify that the information above is true and complete. You authorize Farmers and Merchants State Bank to verify the above information and to obtain additional information on your credit history, standing and deposit accounts which are or have been maintained with other institutions.

Applicants Signature

Date

Joint Applicants Signature

Date