

FIRST STATE BANK AND TRUST COMPANY – CONSUMER

| | |
|------------------|--|
| ACCOUNT # | |
| DEBIT | FEE SCHEDULE REC'D TERMS & CONDITIONS |
| REG E OPT IN/OUT | |
| NUMBER OF CARDS | |
| DATE/INITIAL | |



| | |
|----------------|--|
| CHECKING | |
| SAVINGS | |
| EMAIL ADDRESS: | |
| | |
| | |

CIP OFAC **PRIMARY APPLICANT** EXISTING

| | | | | |
|--|--------------|--------------|-----------|------------|
| LAST NAME | FIRST | MI | SSN | DOB |
| ADDRESS | CITY | STATE | ZIP | HOW LONG? |
| PREVIOUS ADDRESS (IF LESS THAN 2 YRS AT CURRENT) | CITY | STATE | ZIP | PHONE |
| EMPLOYER | CITY | PHONE | HOW LONG | CELL PHONE |
| OCCUPATION | DRIVERS LIC# | STATE | ISSUE | EXP |
| | | | CARD(Y/N) | PIN |
| NEAREST RELATIVE NOT LIVING WITH YOU | PHONE | RELATIONSHIP | | |
| COMMENTS | | | | |

ARE YOU A: US CITIZEN RESIDENT ALIEN NEITHER/W-8 BEN COUNTRY CODE:

CIP OFAC **CO-APPLICANT** EXISTING

| | | | | |
|--|--------------|--------------|-----------|------------|
| LAST NAME | FIRST | MI | SSN | DOB |
| ADDRESS | CITY | STATE | ZIP | HOW LONG? |
| PREVIOUS ADDRESS (IF LESS THAN 2 YRS AT CURRENT) | CITY | STATE | ZIP | PHONE |
| EMPLOYER | CITY | PHONE | HOW LONG | CELL PHONE |
| OCCUPATION | DRIVERS LIC# | STATE | ISSUE | EXP |
| | | | CARD(Y/N) | PIN |
| NEAREST RELATIVE NOT LIVING WITH YOU | PHONE | RELATIONSHIP | | |
| COMMENTS | | | | |

ARE YOU A: US CITIZEN RESIDENT ALIEN NEITHER/W-8 BEN COUNTRY CODE:

BENEFICIARY/SIGNER/OTHER

| | | | | |
|-----------|-------|-------|-----|-------|
| LAST NAME | FIRST | MI | SSN | DOB |
| ADDRESS | CITY | STATE | ZIP | PHONE |

ANTICIPATED ACCOUNT ACTIVITY (Estimate based on one month statement)

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

| | | | |
|--------------------------|--------|--|---|
| DEPOSITS | NUMBER | <input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> ACH <input type="checkbox"/> WIRE <input type="checkbox"/> ALL | |
| WITHDRAWALS | NUMBER | <input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> ACH <input type="checkbox"/> WIRE <input type="checkbox"/> ALL | |
| WIRE ACTIVITY (INCOMING) | NUMBER | AVERAGE \$ AMOUNT | SOURCE DOMESTIC OR INTERNATIONAL |
| WIRE ACTIVITY (OUTGOING) | NUMBER | AVERAGE \$ AMOUNT | DOMESTIC OR INTERNATIONAL |
| CARD ACTIVITY | NUMBER | <input type="checkbox"/> LOCAL USE <input type="checkbox"/> STATEWIDE USAGE <input type="checkbox"/> BOTH | |

NOTICE: PLEASE READ CAREFULLY BEFORE COMPLETING THE APPLICATION FOR CREDIT.
THE FEDERAL EQUAL CREDIT OPPORTUNITY ACT PROHIBITS CREDITORS FROM DISCRIMINATING AGAINST CREDIT APPLICANTS ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, MARITAL STATUS, AGE (PROVIDED THAT THE APPLICANT HAS THE CAPACITY TO ENTER INTO A BINDING CONTRACT) BECAUSE ALL OR PART OF THE APPLICANT'S INCOME DERIVES FROM ANY PUBLIC ASSISTANCE PROGRAM; OR BECAUSE THE APPLICANT HAS IN GOOD FAITH EXERCISED ANY RIGHT UNDER THE CONSUMER CREDIT PROTECTION ACT. THE FEDERAL AGENCY THAT ADMINISTERS COMPLIANCE WITH THIS LAW CONCERNING THIS CREDITOR IS; THE OFFICE OF THE FEDERAL DEPOSIT INSURANCE CORPORATION, 2345 GRAND BOULEVARD, SUITE 1200, KANSAS CITY, MO 64108. YOU ARE NOT REQUIRED TO SUBMIT INFORMATION RELATING TO YOUR SPOUSE OR MARITAL STATUS IN ORDER TO SECURE CREDIT UNLESS:

- (1) YOU ARE APPLYING FOR CREDIT JOINTLY AND YOUR SPOUSE WILL BE CONTRACTUALLY LIABLE FOR THIS LOAN.
- (2) YOU ARE EITHER BUYING OR RELYING UPON COMMUNITY PROPERTY AND/OR YOUR SPOUSE'S INCOME TO REPAY THIS LOAN.
- (3) YOU ARE RELYING ON ALIMONY, CHILD SUPPORT, OR MAINTENANCE PAYMENTS FROM A SPOUSE OR FORMER SPOUSE AS A BASIS FOR REPAYMENT OR YOU ARE OBLIGATED TO MAKE ALIMONY, CHILD SUPPORT, OR MAINTENANCE PAYMENTS.

I (WE) CERTIFY THE ABOVE INFORMATION TO BE TRUE IN EVERY RESPECT AND THAT IT CORRECTLY REFLECTS MY (OUR) CURRENT FINANCIAL CONDITION. IN THE EVENT THAT THE CREDIT APPLIED FOR IS APPROVED, I (WE) AGREE TO READ AND COMPLY WITH THE TERMS OF THE AGREEMENT WHICH WILL BE FURNISHED TO ME (US). I (WE) AGREE TO PROVIDE A WRITTEN FINANCIAL STATEMENT UPON REQUEST. I (WE) AUTHORIZE THE CREDITOR TO MAKE WHATEVER CREDIT INQUIRIES IT DEEMS NECESSARY IN CONJUNCTION WITH MY (OUR) CREDIT APPLICATION OR IN THE COURSE OF REVIEW OR COLLECTION OF ANY CREDIT EXTENDED IN RELIANCE ON THE APPLICATION INCLUDING, WITHOUT LIMITATION, INQUIRIES TO FILE AND FURNISH THE CREDITOR ANY INFORMATION IT MAY HAVE OR OBTAIN IN RESPONSE TO SUCH CREDIT INQUIRIES AND AGREE THAT SAME SHALL REMAIN THE PROPERTY OF THE CREDITOR WHETHER OR NOT CREDIT IS EXTENDED. IF SECURITY IS REAL ESTATE, GIVE FULL NAME (S) ON THE TITLE AND COMPLETE DESCRIPTION OF REAL ESTATE.

SIGNATURE AND DATE _____ SIGNATURE AND DATE _____