



# FIRST SECURITY BANK

HENDRICKS, MINNESOTA  
www.fsbhendricks.com

\* Indicates a Required Field

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

## Online Banking Application

You must be 18 years of age to inquire about an account over the Internet. If you are under 18 years of age, please visit our office.

### Customer General Information

First Name: *	Middle Initial:
Last Name: *	Date of Birth: * (mm/dd/yyyy)
Address: *	
City: *	State & ZIP: *
Home Phone: * (000-000-0000)	Daytime Phone: * (000-000-0000)
Email Address: * (youraddress@yourhost.com)	

**Please Note:** If you are applying for Online Banking, you will be required to print the online application, complete it and drop it off at our office or fax to (507) 275-3142. You will receive your Online Banking ID and Password in the next 5 business days.

For the "Descriptive Name" please indicate checking, savings, money market, time certificate, or loan.

### Online Banking

Please give me access to and the ability to transfer funds between the following listed accounts on which I am an owner.

Account Number	Descriptive Name

### Additional Information

Social Security Number: * (000-00-0000)
Driver's License or State ID Number: *
State of Driver 's License or State ID: *

### Contact Information

How would you prefer to be contacted? *	Phone	Email	Mail
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Banking ▲ Insurance ▲ Investments

P.O. Box 7 • 113 South Main Street • Hendricks, MN 56136 • 507-275-3141 • Fax 507-275-3142

MEMBER FDIC