



# APPLICATION

## 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 to you:** When you open an account or apply for a loan, we will ask for your name, address, date of birth and other information that will allow us to identify you. We will also ask to see your driver's license or other identifying documents.

## PERSONAL ACCOUNT

### PRIMARY ACCOUNT HOLDER: (\*Required Information)

\*Name (print please): \_\_\_\_\_

\*Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ \*Date of Birth: \_\_\_\_\_

\*Driver's License Number: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Expiration Date: \_\_\_\_\_

\*Physical Address: \_\_\_\_\_  
\_\_\_\_\_

\*Passport/VISA Number: \_\_\_\_\_ \*State/Country: \_\_\_\_\_ \*Expiration Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

\*Home Phone Number: \_\_\_\_\_ Work Number: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

\*Which states have you lived in during the last five years?: \_\_\_\_\_

Would you like to access this account with our free internet banking? \_\_\_ Yes \_\_\_ No

If yes, would you like eStatements instead of mailed paper statements? \_\_\_ Yes \_\_\_ No

### SECONDARY ACCOUNT HOLDER: (\*Required Information)

\*Name (print please): \_\_\_\_\_

\*Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ \*Date of Birth: \_\_\_\_\_

\*Driver's License Number: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Expiration Date: \_\_\_\_\_

\*Physical Address: \_\_\_\_\_  
\_\_\_\_\_

\*Passport/VISA Number: \_\_\_\_\_ \*State/Country: \_\_\_\_\_ \*Expiration Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

\*Home Phone Number: \_\_\_\_\_ Work Number: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

\*Which states have you lived in during the last five years?: \_\_\_\_\_

**Would you like to access this account with our free internet banking?** \_\_\_ Yes \_\_\_ No

**If yes, would you like eStatements instead of mailed paper statements?** \_\_\_ Yes \_\_\_ No

**If there are any additional signers, please provide the information on a separate piece of paper.**

**OPTIONAL – BENEFICIARIES (\*Required Information)**

\*Name (print please): \_\_\_\_\_

\*Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ \*Date of Birth: \_\_\_\_\_

\*Address: \_\_\_\_\_  
\_\_\_\_\_

**Second – Beneficiary**

\*Name (print please): \_\_\_\_\_

\*Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ \*Date of Birth: \_\_\_\_\_

\*Address: \_\_\_\_\_  
\_\_\_\_\_

**If there are any additional beneficiaries, please provide the information on a separate piece of paper.**

*All new applicants for deposit accounts at Los Alamos National Bank are subject to a Credit Scan verification by at least one credit bureau. Credit scans will occur prior to establishing the new account, however, Los Alamos National Bank reserves the right to access credit history at any time.*

X \_\_\_\_\_ X \_\_\_\_\_

All account holders must sign.