

# Peoples State Bank

## New Account Information

The purpose of this questionnaire is to begin the application process. All applications are subject to approval. Please note that Primary and Joint account holders will need to sign an official account form in person at Peoples State Bank before the account can be opened. For your own account security, we will also need to photocopy your driver's license(s) or other form of a valid U.S. issued picture ID so we can have it on file to accurately identify you in the future.

### INDIVIDUAL ACCOUNT

(Fill in this column for an Individual account)

### JOINT ACCOUNT

(Fill in this column for a Joint Owner)

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

\_\_\_\_\_  
Physical Address

\_\_\_\_\_  
Physical Address (if different)

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
City, State, Zip (if different)

\_\_\_\_\_  
Mailing Address (if different)

\_\_\_\_\_  
Mailing Address (if different)

\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Driver's License Number & Expiration Date

\_\_\_\_\_  
Driver's License Number & Expiration Date

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Work Phone Number

\_\_\_\_\_  
Work Phone Number

### **Type of Account:**

Personal Checking     Money Market     Savings     CD     IRA

I / we would like an ATM / Debit Card. # of cards: \_\_\_\_\_