



Farmers National Bank

Member FDIC - Equal Housing Lender

[Privacy Statement](#)

Business Online Banking Enrollment

First Name:		Last Name:	
Online Banking Enrollment			
Business Name	Primary Contact Name	Primary Contact Title	Primary Contact Date of Birth
Primary Contact Email Address		Primary Contact Email Address Confirmation	
Business Address	Address Line 1		
	Address Line 2		
	City	State	ZIP Code
Business Phone	Business Fax	Business Tax Id Number	
Primary Account			
Primary Account Number			
Last Statement Balance <i>ending balanced listed on the last statement your received. This balance must be correct to complete enrollment</i>			
Primary Account Type:	<input type="radio"/> Checking <input type="radio"/> Savings		
Additional Accounts			
Account 2 Number			

Account 2 Type	<input type="radio"/> Checking <input type="radio"/> Savings
Account 3 Number	
Account 3 Type	<input type="radio"/> Checking <input type="radio"/> Savings
Account 4 Number	
Account 4 Type	<input type="radio"/> Checking <input type="radio"/> Savings
Account 5 Number	
Account 5 Type	<input type="radio"/> Checking <input type="radio"/> Savings
Additional Information	
Would you like to transfer between accounts?	<input type="radio"/> Yes <input type="radio"/> No
Would you like to set up other authorized signers or employees with online access?	<input type="radio"/> Yes <input type="radio"/> No
Would you like to use online Bill Payment? <i>checking only</i>	<input type="radio"/> Yes <input type="radio"/> No
Would you like to be able to initiate outgoing wire transfers?	<input type="radio"/> Yes <input type="radio"/> No
Would you like to receive your statements via eStatement? <i>for the accounts listed above.</i>	<input type="radio"/> Yes <input type="radio"/> No
Would you like to be able to initiate ACH transfers for payroll or payments?	<input type="radio"/> Yes <input type="radio"/> No