

First Name:

## Make the Switch

Last Name:

Submitted on:					
law requires all financial inst What this means for you: What this means for you: What allow us to identify you. We security Notice: You should ONLY fill out this latest version, download a constructions:	Procedures for Opening a New York state.  Procedures for Opening a Nequirements: To help the govintuitions to obtain, verify, and then you open an account, we may also ask to see your dress Application online if you aropy now.	New Account vernment fight the funding of record information that ide ve will ask for your name, ac river's license or other idention	of terrorism and money entifies each person wh ddress, date of birth, ar ifying documents.	laundering activities, Federal o opens an account. nd other information that will	
<ol> <li>Complete Application and</li> <li>To safeguard your privacy memory when you quit your</li> <li>We will contact you with the requested to provide photocom</li> </ol>	<ul> <li>QUIT your browser and re browser.</li> <li>location of our closest off opies of your Driver's Licens</li> </ul>	estart it again after using this fice and any other documer	ntary requests we may		
First Name		Middle Initial	Hadon	Last Name	
Address Information (required)	Address Line 1				
	Address Line 2				
	City	State	ZIP Co	ode	
Home Phone Work Phone					
Date of Birth	Socia	al Security No.	Your I	E-mail Address	
Driver's License No.		's License State	Issue Date	Expiration Date	
Employer (required)					
Occupation (required)					

If you are applying for a joint account or an account that you and another person will use, complete all sections, providing information about the Joint Applicant or user.	Check box fo	r Joint Account			
	Joi	int Account Holder (with right of surviv	vorship)		
First Name		Middle Initial	Last Name		
Address Information	Address Line 1				
	Address Line 2  City	State	ZIP Cod	e	
Home Phone Work Phone					
Date of Birth		Social Security No.	Your E-	Your E-mail Address	
Driver's License No.		Driver's License State	Issue Date	Expiration Date	
Employer				_	
Occupation					
		Account Titling Information			
(required)	<ul><li>Individual</li><li>Joint</li><li>In Trust For</li><li>Custodial</li></ul>				
In Trust For (required)	Name	Social Security No.	Date of Birth	Percentage	
Custodial (required)	Name	Social Security No		Date of Birth	
	I/We	would like to apply for the following a	ccount(s):		

Checking Accounts	Simply Free Checking  Seneca Rewards Checking  Premier Interest Checking  Fabulous Fifty+ Checking			
Savings Accounts	<ul><li>☐ Simple Savings</li><li>☐ Fabulous Fifty+ Savings</li><li>☐ Seneca Kids Super Saver</li></ul>			
Money Market Accounts	Simple Money Market			
Visa Check/ATM Card	☐ Visa/ATM Card			
How did you hear about us? (required)				
	Making The Switch			
I will need help with: check all that apply	Balance transfer(s) Loan transfer(s) Closing my old account(s) Getting new checks Online access Other:			
backup withholding. See Tax <i>Taxpayer Identification Numb</i> (1) the number shown on this (2) I am not subject to backup (a) I am exempt from back (b) I have not been notified (c) the IRS has notified me (d) the IRS has notified me (3) I am a U.S. person (include Certification Instructions: You withholding because of under the IRS that you are no longer I understand that if I do not prequired to withhold twenty pay submitting this application personal identification number	kup withholding, or d by the Internal Revenue Service (IRS) that I am subject to backup withholding, or that I am no longer subject to backup withholding as a result of failure to report all interest or dividends, or that I am no longer subject to backup withholding, and			

Seneca Savings, N.A..
I agree to the terms and conditions for any accounts or services that I have now or in the future, and as they change from time to time. I agree at any time you may request information from others about my credit or accounts and that you provide to others experience information about me or my accounts with Seneca Savings, N.A.

this application, and all persons listed here will be owners, except as provided as follows: If I wish an account to have (as applicable) fewer, additional, or different owner(s), a completed, signed application for the specific account must be submitted to and accepted by

I/We AGREE with the above statement