



1ST SUMMIT BANK

Member FDIC

814-262-4010 | www.1stsummit.bank

Member FDIC | Equal Housing Lender

[Privacy Statement](#)

BUSINESS BANKING Switch Today

First Name:

Last Name:

Submitted on:

The purpose of this questionnaire is for us to gather some information, so you can 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 one of our Community Offices before the account can be opened.

Primary Account Owner Information

Full Name (required)

Business Name

Street Address (required)

Address Line 1

Address Line 2

City

State

ZIP Code

Phone Number

Cell Phone

Email Address

Social Security

Date of Birth

Driver's License Number

Issue Date

Expiration Date

Occupation

Joint Account Owner Information

Full Name

Business Name

Street Address	Address Line 1			
	Address Line 2			
	City	State	ZIP Code	
Phone Number	Cell Phone	Email Address	Social Security	Date of Birth
Driver's License Number		Issue Date	Expiration Date	Occupation
Type of Account				
I would like more information on:	<input type="checkbox"/> Business Checking			
	<input type="checkbox"/> Treasury Management			
	<input type="checkbox"/> Merchant Services			
	<input type="checkbox"/> Commercial Loan			
	<input type="checkbox"/> Savings			
<p>USA PATRIOT ACT</p> <p>Important information about 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 for you: When you open an account, we will ask you for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.</p>				