

#### Member FDIC | Equal Housing Lender

**Privacy Statement** 

### New Account Sign Up

First Name:

Submitted on:

Last Name:

# Opening an Account just got easier!

### Apply now to get started. One of our friendly representatives will contact you.

Please note: To apply online you must be 18 years or older, a resident of Franklin or a surrounding county, and a legal resident of the United States. All new accounts are verified through ChexSystems.

New or Current Citizens Bank customer(s)? (required)	<ul> <li>New</li> <li>Current</li> </ul>								
Single or Joint Account? (required)	O Single O Joint								
	Applicant								
First Name (Primary Owner) (required) <i>First Name (Primary Owner)</i>									
Middle Initial (required) <i>Middle Initial</i>									
Last Name (Primary Owner) (required) Last Name (Primary Owner)									
Date of Birth (required) Date of Birth									
Social Security Number (SSN) (required) Social Security Number (SSN)									
Mailing Address (required)	Address Line 1 Address Line 2								
	City	State	ZIP Code						

Is the Physical Address the same as the Mailing Address? (required)	O Yes O No (Please provide	e physical address below	.)			
Physical Address	Address Line 1 Address Line 2 City	Address Line 2				
Contact (required)	Contact Numbers	Cell Phone	Home Phone	Business Phone		
Email Address (required)						
Driver's License Number (required)						
Driver's License (required)	Information	State Issued	Date Issued	Expiration Date		
Occupation (required)						
Employer (required)						
Are you a US Citizen? (required)	O Yes O No					
Account / Product Interests (required)	<ul> <li>CB Liberty</li> <li>CB Loyalty</li> <li>CB Legacy</li> <li>Citizens Savings</li> <li>Citizens Wealth Bu</li> <li>Christmas Club</li> <li>Certificate of Deponent</li> </ul>					
Additional Products		t (If no Co-Applicant pleas	se skip to the end.)			
First Name (Primary Owner) First Name						

Middle Initial Middle Initial				
Last Name Last Name				
Date of Birth				
Social Security Number (SSN)				
Mailing Address	Address Line 1 Address Line 2 City	State	ZIP Co	ode
Is the Physical Address the same as the Mailing Address?	O Yes O No (Please provide	physical address.)		
Physical Address	Address Line 1 Address Line 2 City	State	ZIP Co	ode
Contact (required)	Contact Numbers	Mobile Phone	Home Phone	Business Phone
Email Address				
Driver's License Number				
Driver's License (required)	Information	State Issued	Date Issued	Expiration Date
Occupation				
Employer				
Are you a US Citizen?	O Yes O No			

## Any questions? Please call us at 573-237-3051

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 for you:

When you open an account, we will ask 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.

required) I understand that I will be required to appear in person at a Citizens Bank location to open my account and would like to submit my information

Agreement (required)