Member FDIC | Equal Housing Lender

City of Detroit Application

e privacy of your person	ally-identifying information that y	you provide us online.	
for the City of Detroit. Priver's License/State ID	(front and back) and City of Det	troit work ID will be requir	red to complete the
uirements: To help the outions to obtain, verify, a ase. en you open an account hay also ask to see your Application on-line if you	government fight the funding of t and record information that ident a, we will ask for your name, add driver's license or other identify	tifies each individual or le dress, date of birth, and or ving documents.	gal entity who opens an
click "Submit Application QUIT your browser and browser. e location of our closest y Identification at the bra	I restart it again after using this f office for you to sign a signature anch	e card. You will also be re	•
Pri	imary Account Holder Informatio	on	
	Middle Initial	L	ast Name
Address Line 1			
Address Line 2			
City	State	ZIP Code	
So	cial Security No.	Your E-mail Address	
	for the City of Detroit. river's License/State ID Procedures for Opening a uirements: To help the g utions to obtain, verify, a ase. en you open an account nay also ask to see your Application on-line if you op now. Click "Submit Application QUIT your browser and rowser. e location of our closest y Identification at the bra Pri Address Line 1 Address Line 2 City	for the City of Detroit. river's License/State ID (front and back) and City of Detroit. Procedures for Opening a New Account uirements: To help the government fight the funding of utions to obtain, verify, and record information that identiase. en you open an account, we will ask for your name, addinay also ask to see your driver's license or other identify. Application on-line if you are using a browser with the labory now. Click "Submit Application". QUIT your browser and restart it again after using this rowser. e location of our closest office for you to sign a signature of Identification at the branch Primary Account Holder Information Middle Initial Address Line 1 Address Line 2	Procedures for Opening a New Account uirements: To help the government fight the funding of terrorism and money laur utions to obtain, verify, and record information that identifies each individual or le ase. en you open an account, we will ask for your name, address, date of birth, and o nay also ask to see your driver's license or other identifying documents. Application on-line if you are using a browser with the latest security enhanceme noy now. Click "Submit Application". QUIT your browser and restart it again after using this form. This form is NOT so rowser. In location of our closest office for you to sign a signature card. You will also be re- y Identification at the branch Primary Account Holder Information Middle Initial Address Line 1 Address Line 2 City State ZIP Code

Please upload a copy of your valid current Driver's License/State ID, front and back, and your City of Detroit work ID. (required)	Please submit this information as an additional attachment.	
	Home/Cell Phone	Work Phone
Occupation (required)		
Employer (required)		
Mothers Maiden Name (required)		
	Tell us more about you:	
Are you a current or former official in any branch of government? (required) U.S. Government, including local, city, county, state or		
national office		
If yes, please enter current or former place/positions held e.g., City Council Member of Detroit, Former Treasurer of Detroit		
What type of account are you interested in opening? (required) Checking account eligibility requirements will apply. Checking account eligibility can be reviewed, upon customer request, after a savings account remains in good standing for 12 months.	Simply Free Checking First Personal Savings Tell us about your typical monthly account usage:	
	Cash	
Deposits (required) What type of deposits will you make? Check all that apply.	Checks Wire Transfer incoming ACH (direct deposit: SSA, payroll, etc.) ATM Cash ATM Check	
		
	Internal Transfer (Online, Telephone, etc.)	

Estimated Monthly Deposits (required) What are your estimated total monthly deposits?	Less than \$3,000\$3,000 - \$10K\$10K+
Withdrawals (required) What type of withdrawals will you make? Check all that apply.	Cash Withdrawals Writing Checks
	Cashing Checks Wire Transfer outgoing
	Debit Card ATM Withdrawal
	☐ Popmoney ☐ TransferNOW
	☐ Bill Pay ☐ Internal Transfer (Online, Telephone, etc.)
Estimated Monthly Withdrawal (required) What are your estimated total monthly withdrawals?	Less than \$3,000\$3,000 - \$10K\$10K+
Are any electronic ACH transfers international? (required)	○ N/A ○ Yes ○ No
Are any wire transfers international? (required)	N/AYesNo
Authorization (required)	I AGREE that I authorize First Independence Bank to make any investigation of my credit, either directly or through any agency. I understand that First Independence Bank will retain this application and any other credit information, even if this account is not opened.