



e-Banking Personal Application and Agreement

Customer Information: <i>(print and attach Person screen)</i>	Name:				
	SSN # (last four digits):				
	<input type="checkbox"/> New Agreement <input type="checkbox"/> Modify Existing Agreement				
	E-Mail:				
E-Mail Required →	Phone:			Fax:	

e-Banking User ID:	First Choice:	Second Choice:
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e-Banking Features:	Personal e-Banking users have access to the following online functions: <ul style="list-style-type: none"> - Bank Mail / Messages / Alerts - External Transfers to other banks - Internal Transfers between authorized Community Bank accounts - Online Statements / Account Registers / CheckView - Stop Payments for Checking Accounts* - Account Reports / Activity Downloads - e-Payment (<i>optional online bill payment</i>)* <p>*Subject to additional charges as outlined in the <i>Fee Schedule and Account Information</i> brochure.</p>
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e-Banking Access:	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">Account Number</th> <th style="width: 33%;">Account Type</th> <th style="width: 33%;">Account Name</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Account Number	Account Type	Account Name																		
Account Number	Account Type	Account Name																				

e-Payment Account:	<input type="checkbox"/> I authorize e-Payment transactions be processed through my <i>personal checking</i> account #: <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> <input type="checkbox"/> I no longer wish to utilize Community Bank's e-Payment. Please cancel my online bill paying ability.
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By signing this document I declare that I have read and agree to the terms and conditions outlined in the *Agreement & Disclosure* and *Fee Schedule and Account Information* brochures provided by Community Bank of San Joaquin (CBSJ) and that CBSJ reserves the right to change these terms and conditions at any time.

Authorized Signature:	Date:
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If account(s) require(s) multiple signatures to transact, please have a second account holder sign below.

Authorized Signature:	Date:
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For Bank Use Only:	OSI	eCB
	Sign-On ID:	Sign-On ID:
	Offset:	Offset:
	EAN:	Security Level:
	Processed By:	Processed By:
	Date:	Date:
	Accepted By:	Date:
Verified By:	Date:	