

Welcome to MAPLE BANK

Personal Account Application

Date: _____ Reason for today's visit: New Account Add a Signer Change Signers Signature Update Other _____

If you are new to Maple Bank, please tell us how you heard about us. Welcome! _____

Applicant 1 (Individual Accounts - Fill out Applicant 1 only) *Photo ID required to open.

First Name		Middle Initial		Last Name	
Street Address		City	State/Zip	How long?	Mailing Address (if different than street address)
Home Phone	Social Security #		Birth Date	Driver's License # or Other ID-copy	
Cell Phone	E-Mail Address			Mother's Maiden Name	
Employer's Name			Address		
City		State	Zip	Work Phone	
Nearest Relative/Friend's Name/Address					Phone Number
<p>Do you currently serve as an executive officer, director, or principal owner of a banking organization? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where:</p> <p>Have you had a bank account for the last 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where:</p> <p>Have you had an account closed without your consent within the past 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you ever been convicted of a criminal offense involving the use of a check within the past 2 years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you lived in the State of Minnesota for the last 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>					

Applicant 2 (Complete for 2nd signer on a joint account) *Photo ID required to open.

First Name		Middle Initial		Last Name	
Street Address		City	State/Zip	How long?	Mailing Address (if different than street address)
Home Phone	Social Security #		Birth Date	Driver's License # or Other ID-copy	
Cell Phone	E-Mail Address			Mother's Maiden Name	
Employer's Name			Address		
City		State	Zip	Work Phone	
Nearest Relative/Friend's Name/Address					Phone Number
<p>Do you currently serve as an executive officer, director, or principal owner of a banking organization? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where:</p> <p>Have you had a bank account for the last 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where:</p> <p>Have you had an account closed without your consent within the past 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you ever been convicted of a criminal offense involving the use of a check within the past 2 years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you lived in the State of Minnesota for the last 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>					

<p>Everything stated in this application is correct to the best of my knowledge. You are authorized to obtain credit reports for the purpose of opening this account. This is an application to open an account, which is considered open upon the signing of a signature card and the acceptance of your first deposit. A person supplying a false material statement that is believed not to be true with respect to information on this application "is guilty of perjury." M.S. § 48.512, Subd.2</p>	<p>Applicant #1 Signature _____</p> <p>Applicant #2 Signature _____</p>
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FOR BANK USE

Information provided on the following products/services: Checking ATM/Instant Cash Card Online Banking/Bill Pay
 Savings/Money Market CDs Loans Credit Cards Other _____

We look forward to helping you reach your financial goals.