

First American National Bank Visa CheckCard Application

This is a credit application for: *First American Visa CheckCard*

FANB Checking Account #: _____ DATE OPENED: _____

If you wish to use your check card to access your savings account, please enter your account number below:
Important: Your savings account must be in the same name (s) as your checking account. Savings Number: _____

Applicant's Name _____ Social Security Number _____ Date of Birth _____

Joint Applicant's Name _____ Social Security Number _____ Date of Birth _____

Current Address _____ City _____ State _____ Zip _____ Rent/Mgt Payment _____

Previous Address _____ City _____ State _____ Zip _____ Current Phone # _____

Applicant's Employer _____ Position _____ Hire Date (Mth-Yr) _____ Annual Income _____

Employer's Address _____ City _____ State _____ Zip _____ Telephone # _____

Joint Applicant's Employer _____ Position _____ Hire Date (Mth-Yr) _____ Annual Income _____

Employer's Address _____ City _____ State _____ Zip _____ Telephone# _____

Name & Address of nearest relative not living with you. _____ Telephone# _____

MOTHER'S MAIDEN NAME: _____

Please read before signing:

I understand that this is not a credit card application. I've answered the questions on this application fully and truthfully, and all information provided is correct. I understand that if approved, cards and agreements will be mailed to the address listed above. I promise not to use my First American Visa CheckCard until I have received a copy of the agreement governing its use and have agreed to its terms. If this application is for a joint account, I understand that each signer will be liable for the full amount of all withdrawals.

I authorize you to obtain information to check my credit records and verify statements made on this application.

Signature of Applicant _____ Date _____

Signature of Joint Applicant _____ Date _____

Please return the completed application to:

First American National Bank
1251 First American Drive
P O Box 397
Iuka, MS 38852

Officer Initial: _____ Date: _____

For Office Use Only:

Primary # _____ Date: _____

Joint # _____

E _____ BW _____ DB/AT _____ Emp. Initial: _____