



Consumer New Account Application

Note: If the account will have multiple signers/owners, each applicant will need to fill out an application.

New Customer Existing Customer Employee of SWCB

Customer name: _____

Consumer type: Individual Joint Owners UTMA Representative Payee Trust

Account Type: Savings Checking CD

Signer Information:

Customer name: _____

Date of birth: _____

SSN #: _____ - _____ - _____

Identification Type: NM Real ID DL Passport Military ID Not For Federal Purposes ID/DL

Identification: ID #: _____ State: _____ Issue Date: _____ Expiration Date: _____

Physical address: _____

Mailing address: _____

Primary phone #: _____ - _____ - _____

Secondary phone #: _____ - _____ - _____

Email address: _____

Address matches ID: Yes No

Address verification: Bill Lease agreement Other: _____

Employer: _____

Occupation: _____

Mother's Maiden Name: _____

Consumer Report Authorization

It is the practice of Southwest Capital Bank to obtain a consumer report for all prospective depositors through ChexSystems, Inc.

In accordance with State consumer reporting law, the Bank must obtain permission from each consumer, in writing prior to obtaining a consumer report.

By signing this acknowledgment, each signer authorizes Southwest Capital Bank to obtain any credit reference necessary including but not limited to ChexSystems, Inc., in connection with the deposit account application and at any time while an account holder with the Bank.

Customer Signature _____

Date: _____

For Internal use only

Name of Bank Representative who ran ChexSystems report:	
Date report was run:	
Were red flags cleared?	(Circle one) Yes No
Account Approved/Opened?	(Circle one) Yes No
If not approved based on report was AAN provided to DG-CIP for review before issued to customer?	(Circle one) Yes No