## Jefferson Bank

## Business Online Banking Application

Thank you for accepting our invitation to enroll in Online Banking!
BUSINESS INFORMATION
Business Name: $\qquad$
Business Owner:
(Applicant must be an business owner.)
Address: $\qquad$
City/State/Zip: $\qquad$
Daytime Phone: $\qquad$ E-mail Address: $\qquad$

## ACCOUNT(S) FOR ACCESS

Use the table below to list all accounts you want to access online. Each account can be associated with an easy to remember pseudo name (reference), so please choose a descriptive name for each account. For security purposes you may not use your account number as a pseudo name.

| ACCOUNT NUMBER | ACCOUNT TYPE | REFERENCE NAME |
| :---: | :---: | :---: |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

## TERMS \& CONDITIONS

My signature below indicates that I have reviewed and agree to the Business Online Banking Agreement available at www.jeffersonbank.com.

## Signature

$\square$

## BANKUSE

CIF: $\qquad$ Verified By: $\qquad$ Date: $\qquad$

