

It's so easy



Please provide us your account information below. Drop the information off at any Scott County State Bank location. Too much trouble? Stop by and we'll fill out the information for you! Or call us at 812-752-4501. You can also email us at custservice@scottcountystatebank.com!

() Individual Account () Joint Account

Name _____
First M.I. Last

Address _____ State _____ Zip _____

Phone _____ Alt. Phone _____

Email _____

Primary Account Holder Information

Social Security # _____

Driver's License # _____ State _____ Issue Date _____

Expiration Date _____ Date of Birth _____

Employer _____ Position _____

Joint Account Holder Information

Social Security # _____

Driver's License # _____ State _____ Issue Date _____

Expiration Date _____ Date of Birth _____

Employer _____ Position _____

Important Information

Some companies require the use of their own forms to initiate the switching of accounts. In order to help facilitate this change from your existing account to your new Scott County State Bank account, we may ask you to provide your current banking information, including a previous bank statement and any forms supplied to you by your employer or party originating the debit or credit.

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means for you: When you open an account we will ask for you name, address, date of birth, and other information that allows us to identify you. We may also ask to see your driver's license or other identifying documents.

Personal information obtained in this document is maintained in accordance with The Scott County State Bank privacy policy.



Switch Authorization for Direct Deposit

| | | | |
|--------------|--------------|---------------|---------|
| 1) Employer | Phone # | Bank Name | Phone # |
| Bank Account | Account Type | ABA Routing # | |
| 2) Employer | Phone # | Bank Name | Phone # |
| Bank Account | Account Type | ABA Routing # | |
| 3) Employer | Phone # | Bank Name | Phone # |
| Bank Account | Account Type | ABA Routing # | |

Switch Authorization for Automatic Payment

| | |
|--------------|---------------|
| 1) Payee | Phone # |
| Bank Account | ABA Routing # |
| 2) Payee | Phone # |
| Bank Account | ABA Routing # |
| 3) Payee | Phone # |
| Bank Account | ABA Routing # |

Account Preferences Please indicate accounts and services you currently use or are interested in:

- | | | |
|---|---|--|
| <input type="checkbox"/> Savings Account | <input type="checkbox"/> Personal Loan | <input type="checkbox"/> Retirement Programs (401k, IRA, SEP, etc.) |
| <input type="checkbox"/> Money Market Account | <input type="checkbox"/> Direct Deposit | |
| <input type="checkbox"/> Certificate of Deposits | <input type="checkbox"/> Internet Banking/Cash Management | <input type="checkbox"/> Wire Transfer Services |
| <input type="checkbox"/> Sweep Account/Overdraft Protection | <input type="checkbox"/> Treasury Tax Payment | |