

# Account Set-Up Form

## Primary Account Holder

|  |                     |                        |                          |
|--|---------------------|------------------------|--------------------------|
| _____<br>Last Name   | _____<br>First Name | _____<br>Middle        | _____<br>E-mail Address  |
| _____<br>Street Address  |                     | _____<br>Apartment No. | _____<br>City State Zip  |
| _____<br>Mailing Address   |                     | _____<br>Apartment No. | _____<br>City State Zip  |
| _____<br>Home Phone  |                     | _____<br>Work Phone    |                          |
| _____<br>Social Security Number  |                     | _____<br>Date of Birth |                          |
| _____<br>Drivers License Number<br>(Include photocopy of Drivers License and Social Security card) |                     | _____<br>State         | _____<br>Expiration Date |

|  |                     |                        |                          |
|--|---------------------|------------------------|--------------------------|
| _____<br>Last Name   | _____<br>First Name | _____<br>Middle        | _____<br>E-mail Address  |
| _____<br>Street Address  |                     | _____<br>Apartment No. | _____<br>City State Zip  |
| _____<br>Mailing Address   |                     | _____<br>Apartment No. | _____<br>City State Zip  |
| _____<br>Home Phone  |                     | _____<br>Work Phone    |                          |
| _____<br>Social Security Number  |                     | _____<br>Date of Birth |                          |
| _____<br>Drivers License Number<br>(Include photocopy of Drivers License and Social Security card) |                     | _____<br>State         | _____<br>Expiration Date |

- |  |   |
|--|---|
| <input type="radio"/> <b>FREE</b> Checking           | <input type="radio"/> <b>NOW</b> Checking |
| <input type="radio"/> <b>RESTRICTED NOW</b> Checking | <input type="radio"/>                     |
| <input type="radio"/> <b>Savings</b>                 |   |
| <input type="radio"/> <b>Free Online Banking</b>     |   |

|                              |                       |
|------------------------------|-----------------------|
| _____<br>Place of Employment |                       |
| <input type="radio"/>        | <input type="radio"/> |
| <input type="radio"/>        | <input type="radio"/> |
| <input type="radio"/>        |                       |

*Online Banking Form* must be completed. Form can be mailed or completed online at [www.firstfedlfd.com](http://www.firstfedlfd.com)