

<b>DATE</b>

## NEW ACCOUNT STARTER SHEET

**TYPE OF ACCOUNT TO OPEN:**

CHECKING #: \_\_\_\_\_  
 SAVINGS #: \_\_\_\_\_ OPENING DEPOSIT \$ \_\_\_\_\_  
 IRA #: \_\_\_\_\_  
 MONEY MARKET #: \_\_\_\_\_  
 CERTIFICATE #: \_\_\_\_\_ TERM \_\_\_\_\_

### DEPOSITOR INFORMATION

NAME _____	DATE OF BIRTH _____
HOME PHONE _____	WORK PHONE _____
ADDRESS _____	MAILING ADDRESS (If different) _____
DRIVER'S LICENSE (STATE & NUMBER) _____	
SOCIAL SECURITY NUMBER _____	
MOTHERS MAIDEN NAME _____	
HAVE YOU LIVED IN ANY OTHER STATE IN THE PAST 5 YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO	
IF YES, WHAT STATES? _____	
EMAIL ADDRESS _____	

**Signature:** By signing below, (a) I certify the above information is correct, (b) I agree to comply with the terms and conditions governing the accounts and services including fees and charges, (c) I agree that **Pacific West Bank** may contact any source necessary to verify my credit responsibility, including preparation of a credit report by a credit reporting agency, if applicable.

Signature of Depositor: \_\_\_\_\_ Date: \_\_\_\_\_

### DEPOSITOR INFORMATION

NAME _____	DATE OF BIRTH _____
HOME PHONE _____	WORK PHONE _____
ADDRESS _____	MAILING ADDRESS (If different) _____
DRIVER'S LICENSE (STATE & NUMBER) _____	
SOCIAL SECURITY NUMBER _____	
MOTHERS MAIDEN NAME _____	
HAVE YOU LIVED IN ANY OTHER STATE IN THE PAST 5 YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO	
IF YES, WHAT STATES? _____	
EMAIL ADDRESS _____	

**Signature:** By signing below, (a) I certify the above information is correct, (b) I agree to comply with the terms and conditions governing the accounts and services including fees and charges, (c) I agree that **Pacific West Bank** may contact any source necessary to verify my credit responsibility, including preparation of a credit report by a credit reporting agency, if applicable.

Signature of Depositor: \_\_\_\_\_ Date: \_\_\_\_\_