



FARMERS STATE BANK
-- Business --
ONLINE BANKING APPLICATION
www.farmersstatebank.com

This application is used for establishing Online Banking services for businesses. Please complete all required fields and sign as indicated. Incomplete information may delay your ability to use this service.

Business Online Banking Customer		
Business Name		
Street Address		
Mailing Address		
City	State	Zip Code
Tax ID#		
Business Phone		Business Fax
Business Type		E-mail address
Reference Password		
Primary Contact		Phone
Secondary Contact		Phone

Online Banking Application Terms

By signing below, I (we) certify that the information is true and accurate. I (we) authorize Farmers State Bank to verify any information included in this application. The use of Online Banking shall be governed by the terms and conditions of the Farmers State Bank Online Banking Agreement which I (we) will receive by mail and read before using Online Banking. I (we) hereby agree to be bound by the terms and conditions therein and as amended from time to time. I (we) agree that Farmers State Bank is authorized to act on instructions received under my (our) password. Furthermore, I (we) accept responsibility for the confidentiality and security of my (our) password and agree to change it regularly. I (we) agree that our company or organization has a completed Resolution of Authorized Signers document with Farmers State Bank authorizing those individuals who may conduct business on behalf of my (our) company or organization; however I (we) understand that Farmers State Bank is not under any obligation to monitor transactions through Online Banking, to determine that they are made by an authorized agent of our company.

Authorized Company or Organization Signatures

_____ Date _____

_____ Signature(s) verified by _____

FSB Employee

Please indicate which accounts you wish to access through Online Banking.

Accounts requiring more than one signature may be accessed but will not have transfer ability.

YES ___ I wish to access all my active accounts

OR

YES ___ I wish to access only these accounts:

Type	Account Number
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_____	_____
_____	_____