Tri-County Bank

Business Internet Banking Application

Name	Tax ID		
Address	Phone Number	Phone Number	
City	State	Zip	
Account Information			
Account Number	Type		
Account Number	Туре		
Account Number	Type		
Sign up for OneCli	ck bill pay and Email Statements O	n-line.	
Service Agreement			
By signing below: (1) I/We will be boun Agreement which Tri-County Bank may issued can be used to withdraw funds from password. Only authorized signers will have the password if the signers on the accounfollow any instructions transmitted by used disclose information about any of my accountransactions, using NetTeller/OneClick. Its agents information regarding my accountral transactions and the signers of the signer of the signers of the signer of th	amend from time to time. (2) I/we in the account(s) and that it is my relave access to the password. I/we will change. I/we authorize Tri-Count of my password. (3) I/we authorize ounts to third parties (including pay I also authorize my payees to disclount(s) with such parties in order to counts.	understand that the password esponsibility to safeguard the ill be responsible to change ty Bank and its agent to ze Tri-County Bank to zees) in order to complete use to Tri-County Bank and/or complete transactions using	
Authorized Account Owner/Signer	Date		

I/we, by signature above, certify that everything that has been stated in this application and on any attachments is correct. Tri-County Bank is authorized to retain this application whether or not it is approved. By completing and submitting this form, I/we accept the terms and agreements outlined in the Online Access Agreement and Electronic Funds Transfer Act Disclosure.