Tri-County Bank Consumer Internet Banking Application

Name	Tax ID	
Address	Phone Number	
City	State	Zip
Account Information		
Account Number	Type	
Account Number	Type	
Account Number	Type	
Sign up for One	eClick bill pay and Email Statements On-l	ine.
Service Agreement		
Agreement which Tri-County Bank may my password. I authorize Tri-County Ba my password. (3) I authorize Tri-County parties (including payees) in order to con my payees to disclose to Tri-County Ban	the terms and conditions of Tri-County E amend from time to time. (2) I understand nk and its agent to follow any instructions. Bank to disclose information about any of applete transactions, using NetTeller/OneCa k and/or its agents information regarding to ions using NetTeller/OneClick, including	d that I must safeguard s transmitted by use of of my accounts to third lick. I also authorize my account(s) with
Account Holder	Date	

I, 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 accept the terms and agreements outlined in the Online Access Agreement and Electronic Funds Transfer Act Disclosure.