



Brighton
BANK
"Our Prime Interest Is Our Customer"

Date : _____

Account Owner/Signer Information

Account # _____

Business Name _____ Tax ID: _____

Mailing Address: _____

Business Phone: _____

(Signer) First Name _____ MI _____ Last Name _____

Address: _____

Social Security # _____ - _____ - _____ DOB: _____ Hm Ph: _____

Driver's License # _____ Issuing State _____ Exp. Date _____

Secondary Form: _____ Cell: _____

Email Address: _____

(Signer) First Name _____ MI _____ Last Name _____

Address: _____

Social Security # _____ - _____ - _____ DOB: _____ Hm Ph: _____

Driver's License # _____ Issuing State _____ Exp. Date _____

Secondary Form: _____ Cell: _____

Email Address: _____

***Please Note: P.O. Box holders must furnish physical address as well as mailing address**

Physical Street Address: _____

City: _____ State: _____ Zip + 4: _____

How long at present address? _____

Email Address: _____

Are you interested in Online Banking? _____

Type of Account: _____

Amount of Opening Deposit: \$ _____

Source of Funds: Check _____ Cash _____ Internal Transfer _____ (Account # _____)

How did you hear about us? Covington Leader _____ Commercial Appeal _____ Other _____

Radio _____ Referral _____ Direct Mail _____ Website _____

The information I have provided is correct to the best of my knowledge. I authorize Brighton Bank to check credit and/or employment history should it deem necessary.

X _____ X _____
