



# THE TRUST BANK

Internet Banking  
and Bill Pay  
Application

\*One User ID and Password will be generated per SS#

DATE: \_\_\_\_\_

Account #'s (DDA, SAV, C/D, Loans)

Primary Account Holder (Name, SS#, DOB)

Phone Number(s):

Cell: \_\_\_\_\_ Work: \_\_\_\_\_ Home: \_\_\_\_\_

Street Address:

\_\_\_\_\_  
\_\_\_\_\_

Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_

Email Address:

\_\_\_\_\_

(Providing an e-mail address will expedite your setup. Also, by providing your e-mail address you are agreeing to receive information by e-mail from The Trust Bank. We will NEVER ask for your private financial account information by e-mail.)

Primary branch visited:  Lenox  Adel  Moultrie

**\*\*For added security we will require you to give us a security code when inquiring on your account for Internet Banking purposes. At this time, please designate a confidential security code. It should be at least 6 but not more than 12 characters and should not be something easily known by others.**

Security Code: \_\_\_\_\_

\_\_\_\_\_ I have read the Bank's Online Banking *Terms and Conditions*.

\_\_\_\_\_ Sign me up for FREE Internet Banking & Bill Pay.

\_\_\_\_\_ Tired of Paper? Ask for an E-Statement Only Form.

Customer Signature: \_\_\_\_\_

\*\*\*BANK USE ONLY\*\*\*



Cavion ID #: \_\_\_\_\_ Issued By: \_\_\_\_\_ Date: \_\_\_\_\_ E-Statement Only Completed Date: \_\_\_\_\_ By: \_\_\_\_\_

1st Letter Mailed Date: \_\_\_\_\_ By: \_\_\_\_\_

2nd Letter Mailed Date: \_\_\_\_\_ or E-mailed Date: \_\_\_\_\_ By: \_\_\_\_\_

SPARAK Verified Date: \_\_\_\_\_ By: \_\_\_\_\_ SHAZAM Verified Date: \_\_\_\_\_ By: \_\_\_\_\_ Filed Date: \_\_\_\_\_ By: \_\_\_\_\_