

The following worksheets will help you to prepare for the Setup portion of your training. Please complete these worksheets PRIOR to the training.

INSTITUTION INFORMATION			
Institution Name: _____			
Address: _____			
ABA Number (fractional number at the top right of check): _____			
Routing Number: _____			
Institution Type: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> State Bank <input type="checkbox"/> National Bank <input type="checkbox"/> State Savings and Loan </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Federal Savings and Loan <input type="checkbox"/> State Savings and Loan <input type="checkbox"/> Federal Savings Bank </td> </tr> </table>	<input type="checkbox"/> State Bank <input type="checkbox"/> National Bank <input type="checkbox"/> State Savings and Loan	<input type="checkbox"/> Federal Savings and Loan <input type="checkbox"/> State Savings and Loan <input type="checkbox"/> Federal Savings Bank	
<input type="checkbox"/> State Bank <input type="checkbox"/> National Bank <input type="checkbox"/> State Savings and Loan	<input type="checkbox"/> Federal Savings and Loan <input type="checkbox"/> State Savings and Loan <input type="checkbox"/> Federal Savings Bank		
Insurer: <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><input type="checkbox"/> FDIC</td> <td style="width: 33%;"><input type="checkbox"/> Privately Insured</td> <td style="width: 33%;"><input type="checkbox"/> Uninsured</td> </tr> </table>	<input type="checkbox"/> FDIC	<input type="checkbox"/> Privately Insured	<input type="checkbox"/> Uninsured
<input type="checkbox"/> FDIC	<input type="checkbox"/> Privately Insured	<input type="checkbox"/> Uninsured	
Federal Tax ID Number: _____			
Signature Card to be used: Select ONLY one of the two <table style="width: 100%; border: none; margin-top: 10px;"> <tr> <td style="width: 50%; vertical-align: top; padding: 5px;"> <input type="checkbox"/> MPSC-LAZ A two page document printing only the most basic party data necessary to open the account. Accommodates one and only one account. Limits the user from being able to make transaction-specific notes on the signature card. </td> <td style="width: 50%; vertical-align: top; padding: 5px;"> <input type="checkbox"/> MPMP-LAZ Consists of two pages of printed party and account data and signatures, plus two separate pages of Terms and Conditions, for a total of four pages. Data prints for up to four individuals. Assuming all the necessary terms are identical can accommodate up to three accounts at once. Allows option to enter additional terms. </td> </tr> </table>	<input type="checkbox"/> MPSC-LAZ A two page document printing only the most basic party data necessary to open the account. Accommodates one and only one account. Limits the user from being able to make transaction-specific notes on the signature card.	<input type="checkbox"/> MPMP-LAZ Consists of two pages of printed party and account data and signatures, plus two separate pages of Terms and Conditions, for a total of four pages. Data prints for up to four individuals. Assuming all the necessary terms are identical can accommodate up to three accounts at once. Allows option to enter additional terms.	
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Default the CD Number as the customer account number: <table style="width: 100%; border: none; margin-top: 5px;"> <tr> <td style="width: 50%;"><input type="checkbox"/> YES</td> <td style="width: 50%;"><input type="checkbox"/> NO</td> </tr> </table>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<input type="checkbox"/> YES	<input type="checkbox"/> NO		
Ability to preselect disclosure check boxes on the account agreement/signature card. <table style="width: 100%; border: none; margin-top: 5px;"> <tr> <td style="width: 50%;"><input type="checkbox"/> YES</td> <td style="width: 50%;"><input type="checkbox"/> NO</td> </tr> </table>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<input type="checkbox"/> YES	<input type="checkbox"/> NO		
Optional Information: We wish to invoke the optional rule that allows disclosure of the APY equal to the interest rate for time accounts with a term greater than one year that do not compound, but that do disclose required withdrawal of interest at least annually. <table style="width: 100%; border: none; margin-top: 5px;"> <tr> <td style="width: 50%;"><input type="checkbox"/> YES</td> <td style="width: 50%;"><input type="checkbox"/> NO</td> </tr> </table>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<input type="checkbox"/> YES	<input type="checkbox"/> NO		
Print a signature prompt for the minor on Uniform Transfers/Gifts to Minors Act accounts. We collect this signature even though the minor has no right to withdraw until the age of majority. <table style="width: 100%; border: none; margin-top: 5px;"> <tr> <td style="width: 50%;"><input type="checkbox"/> YES</td> <td style="width: 50%;"><input type="checkbox"/> NO</td> </tr> </table>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<input type="checkbox"/> YES	<input type="checkbox"/> NO		
General Information Phone: _____			
Rate Information Phone Number(s): _____			
Fax: _____			
E-mail: _____			
Web Address: _____			

Notice Regarding Inaccurate Information: (this will print on the FCRA-NRA document)

Contact Name: _____ Phone: _____

Contact Address: _____

IRA Information:

- Custodian Trustee

IRA Fee(s):

- Annual Administration Fee: _____ Termination Fee: _____
 Other: _____

Do you tie any accounts to Published Variable Rate Indexes?

- Yes, please specify: _____
 No.

Do you want ARTA to automatically number you Certificate's?

- Yes, please specify ranges you are currently using.
 Consumer CD Range: _____
 Business CD Range: _____
 IRA CD Range: _____
 Other: _____
 No.

Do you have branches?

- Yes, please provide the address, phone number, fax number, e-mail and web address for all branch locations.
 No.

Checking Account Policy/Product Worksheet

Select all that are applicable. Complete separately for consumer and non consumer policies

Please make copies for additional policies.

Product Name to print on TISA Disclosure			
Account Purpose	<input type="checkbox"/> Consumer (Non-IRA) <input type="checkbox"/> Non-Consumer	<input type="checkbox"/> Consumer (Non-IRA) <input type="checkbox"/> Non-Consumer	<input type="checkbox"/> Consumer (Non-IRA) <input type="checkbox"/> Non-Consumer
Account Type	<input type="checkbox"/> Checking <input type="checkbox"/> ETA	<input type="checkbox"/> Checking <input type="checkbox"/> ETA	<input type="checkbox"/> Checking <input type="checkbox"/> ETA
Statement Cycle	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> None <input type="checkbox"/> Quarterly (monthly if EFT activity)	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> None <input type="checkbox"/> Quarterly (monthly if EFT activity)	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> None <input type="checkbox"/> Quarterly (monthly if EFT activity)
Rate Type (please type the interest rate to the right of your selection)	<input type="checkbox"/> Fixed Rate <input type="checkbox"/> Variable Rate <input type="checkbox"/> Credit Against Fees	<input type="checkbox"/> Fixed Rate <input type="checkbox"/> Variable Rate <input type="checkbox"/> Credit Against Fees	<input type="checkbox"/> Fixed Rate <input type="checkbox"/> Variable Rate <input type="checkbox"/> Credit Against Fees
Rate Detail	<input type="checkbox"/> Single Rate <input type="checkbox"/> Tier A <input type="checkbox"/> Tier B <input type="checkbox"/> Stepped	<input type="checkbox"/> Single Rate <input type="checkbox"/> Tier A <input type="checkbox"/> Tier B <input type="checkbox"/> Stepped	<input type="checkbox"/> Single Rate <input type="checkbox"/> Tier A <input type="checkbox"/> Tier B <input type="checkbox"/> Stepped
Compounding Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Every Other Week <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> Continuous <input type="checkbox"/> No Compounding	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Every Other Week <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> Continuous <input type="checkbox"/> No Compounding	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Every Other Week <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> Continuous <input type="checkbox"/> No Compounding
Crediting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input type="checkbox"/> Semimonthly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input type="checkbox"/> Semimonthly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input type="checkbox"/> Semimonthly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually
What method is used to determine the balance on which interest is paid?	<input type="checkbox"/> Daily <input type="checkbox"/> Average Daily Period: _____	<input type="checkbox"/> Daily <input type="checkbox"/> Average Daily Period: _____	<input type="checkbox"/> Daily <input type="checkbox"/> Average Daily Period: _____

When a non-cash item is received for deposit, when will it begin to accrue interest?	<input type="checkbox"/> On the day of deposit <input type="checkbox"/> First business day after the day of deposit <input type="checkbox"/> No later than the business day credit is received for the item <input type="checkbox"/> Other: _____	<input type="checkbox"/> On the day of deposit <input type="checkbox"/> First business day after the day of deposit <input type="checkbox"/> No later than the business day credit is received for the item <input type="checkbox"/> Other: _____	<input type="checkbox"/> On the day of deposit <input type="checkbox"/> First business day after the day of deposit <input type="checkbox"/> No later than the business day credit is received for the item <input type="checkbox"/> Other: _____
Can additional Deposits be made into the account?	<input type="checkbox"/> Yes How many: _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes How many: _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes How many: _____ <input type="checkbox"/> No
Minimum / Maximum Additional Deposit	\$ _____	\$ _____	\$ _____
Minimum / Maximum Withdrawal	\$ _____	\$ _____	\$ _____
Minimum Balance to Open the Account	\$ _____	\$ _____	\$ _____
Offer Bonuses?	<input type="checkbox"/> Yes, explain: _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes, explain: _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes, explain: _____ <input type="checkbox"/> No
Minimum Balance to Avoid Fees (i.e. Monthly Service Charge Fee)	Fee Based On: <input type="checkbox"/> Single Balance <input type="checkbox"/> Tiered Balance Balance Method: <input type="checkbox"/> Daily <input type="checkbox"/> Average Daily When does the fee apply: _ _____	Fee Based On: <input type="checkbox"/> Single Balance <input type="checkbox"/> Tiered Balance Balance Method: <input type="checkbox"/> Daily <input type="checkbox"/> Average Daily When does the fee apply: _ _____	Fee Based On: <input type="checkbox"/> Single Balance <input type="checkbox"/> Tiered Balance Balance Method: <input type="checkbox"/> Daily <input type="checkbox"/> Average Daily When does the fee apply: _ _____
Account Specific Fees (fees that <u>only</u> apply to this product)			
Other Contract Terms (flows to the Signature Card)			
Other Disclosure Terms (flows to the TISA)			
FACT ACT (disclose negative information required by Reg V at account opening) Consumer only	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Savings Account Policy/Product Worksheet

Select all that are applicable. Complete separately for consumer and non consumer policies
Please make copies for additional policies if needed

Product Name to print on TISA Disclosure			
Account Purpose	<input type="checkbox"/> Consumer (Non-IRA) <input type="checkbox"/> IRA <input type="checkbox"/> Consumer & IRA <input type="checkbox"/> Non-Consumer	<input type="checkbox"/> Consumer (Non-IRA) <input type="checkbox"/> IRA <input type="checkbox"/> Consumer & IRA <input type="checkbox"/> Non-Consumer	<input type="checkbox"/> Consumer (Non-IRA) <input type="checkbox"/> IRA <input type="checkbox"/> Consumer & IRA <input type="checkbox"/> Non-Consumer
Account Type	<input type="checkbox"/> Money Market <input type="checkbox"/> Savings <input type="checkbox"/> Club <input type="checkbox"/> ETA	<input type="checkbox"/> Money Market <input type="checkbox"/> Savings <input type="checkbox"/> Club <input type="checkbox"/> ETA	<input type="checkbox"/> Money Market <input type="checkbox"/> Savings <input type="checkbox"/> Club <input type="checkbox"/> ETA
Statement Cycle	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> None <input type="checkbox"/> Quarterly (monthly if EFT activity)	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> None <input type="checkbox"/> Quarterly (monthly if EFT activity)	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> None <input type="checkbox"/> Quarterly (monthly if EFT activity)
Rate Type (please type the interest rate to the right of your selection)	<input type="checkbox"/> Fixed Rate <input type="checkbox"/> Variable Rate	<input type="checkbox"/> Fixed Rate <input type="checkbox"/> Variable Rate	<input type="checkbox"/> Fixed Rate <input type="checkbox"/> Variable Rate
Rate Detail	<input type="checkbox"/> Single Rate <input type="checkbox"/> Tier A <input type="checkbox"/> Tier B <input type="checkbox"/> Stepped	<input type="checkbox"/> Single Rate <input type="checkbox"/> Tier A <input type="checkbox"/> Tier B <input type="checkbox"/> Stepped	<input type="checkbox"/> Single Rate <input type="checkbox"/> Tier A <input type="checkbox"/> Tier B <input type="checkbox"/> Stepped
Compounding Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Every Other Week <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> Continuous <input type="checkbox"/> No Compounding	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Every Other Week <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> Continuous <input type="checkbox"/> No Compounding	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Every Other Week <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> Continuous <input type="checkbox"/> No Compounding
Crediting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input type="checkbox"/> Semimonthly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input type="checkbox"/> Semimonthly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input type="checkbox"/> Semimonthly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually

What method is used to determine the balance on which interest is paid?	<input type="checkbox"/> Daily <input type="checkbox"/> Average Daily Period: _____	<input type="checkbox"/> Daily <input type="checkbox"/> Average Daily Period: _____	<input type="checkbox"/> Daily <input type="checkbox"/> Average Daily Period: _____
When a non-cash item is received for deposit, when will it begin to accrue interest?	<input type="checkbox"/> On the day of deposit <input type="checkbox"/> First business day after the day of deposit <input type="checkbox"/> No later than the business day credit is received for the item <input type="checkbox"/> Other: _____	<input type="checkbox"/> On the day of deposit <input type="checkbox"/> First business day after the day of deposit <input type="checkbox"/> No later than the business day credit is received for the item <input type="checkbox"/> Other: _____	<input type="checkbox"/> On the day of deposit <input type="checkbox"/> First business day after the day of deposit <input type="checkbox"/> No later than the business day credit is received for the item <input type="checkbox"/> Other: _____
Can additional Deposits be made into the account?	<input type="checkbox"/> Yes How many: _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes How many: _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes How many: _____ <input type="checkbox"/> No
Minimum / Maximum Additional Deposit	\$ _____	\$ _____	\$ _____
Minimum / Maximum Withdrawal	\$ _____	\$ _____	\$ _____
Minimum Balance to Open the Account	\$ _____	\$ _____	\$ _____
Offer Bonuses?	<input type="checkbox"/> Yes, explain: _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes, explain: _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes, explain: _____ <input type="checkbox"/> No
Minimum Balance to Avoid Fees (i.e. Monthly Service Charge Fee)	Fee Based On: <input type="checkbox"/> Single Balance <input type="checkbox"/> Tiered Balance Balance Method: <input type="checkbox"/> Daily <input type="checkbox"/> Average Daily When does the fee apply: _ _____	Fee Based On: <input type="checkbox"/> Single Balance <input type="checkbox"/> Tiered Balance Balance Method: <input type="checkbox"/> Daily <input type="checkbox"/> Average Daily When does the fee apply: _ _____	Fee Based On: <input type="checkbox"/> Single Balance <input type="checkbox"/> Tiered Balance Balance Method: <input type="checkbox"/> Daily <input type="checkbox"/> Average Daily When does the fee apply: _ _____
Account Specific Fees (fees that <u>only</u> apply to this product)			
Other Contract Terms (flows to the Signature Card)			
Other Disclosure Terms (flows to the TISA)			
FACT ACT (disclose negative information required by Reg V at account opening) Consumer only	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Time Account Policy/Product Worksheet

Select all that are applicable. Complete separately for consumer and non consumer policies
Please make copies for additional policies if needed

Product Name to print on TISA Disclosure			
Account Purpose	<input type="checkbox"/> Consumer <input type="checkbox"/> IRA <input type="checkbox"/> Consumer & IRA <input type="checkbox"/> Non-Consumer	<input type="checkbox"/> Consumer <input type="checkbox"/> IRA <input type="checkbox"/> Consumer & IRA <input type="checkbox"/> Non-Consumer	<input type="checkbox"/> Consumer <input type="checkbox"/> IRA <input type="checkbox"/> Consumer & IRA <input type="checkbox"/> Non-Consumer
Account Type	<input type="checkbox"/> Time <input type="checkbox"/> Club	<input type="checkbox"/> Time <input type="checkbox"/> Club	<input type="checkbox"/> Time <input type="checkbox"/> Club
Statement Cycle	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> None <input type="checkbox"/> Quarterly (monthly if EFT activity)	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> None <input type="checkbox"/> Quarterly (monthly if EFT activity)	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> None <input type="checkbox"/> Quarterly (monthly if EFT activity)
Rate Type (please type the interest rate to the right of your selection)	<input type="checkbox"/> Fixed Rate <input type="checkbox"/> Variable Rate	<input type="checkbox"/> Fixed Rate <input type="checkbox"/> Variable Rate	<input type="checkbox"/> Fixed Rate <input type="checkbox"/> Variable Rate
Rate Detail	<input type="checkbox"/> Single Rate <input type="checkbox"/> Tier A <input type="checkbox"/> Tier B <input type="checkbox"/> Stepped <input type="checkbox"/> Exchange Rate	<input type="checkbox"/> Single Rate <input type="checkbox"/> Tier A <input type="checkbox"/> Tier B <input type="checkbox"/> Stepped <input type="checkbox"/> Exchange Rate	<input type="checkbox"/> Single Rate <input type="checkbox"/> Tier A <input type="checkbox"/> Tier B <input type="checkbox"/> Stepped <input type="checkbox"/> Exchange Rate
Compounding Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Every Other Week <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> Continuous <input type="checkbox"/> No Compounding	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Every Other Week <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> Continuous <input type="checkbox"/> No Compounding	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Every Other Week <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> Continuous <input type="checkbox"/> No Compounding
Crediting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input type="checkbox"/> Semimonthly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> At Maturity	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input type="checkbox"/> Semimonthly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> At Maturity	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input type="checkbox"/> Semimonthly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually <input type="checkbox"/> At Maturity
What method is used to determine the balance on which interest is paid?	<input type="checkbox"/> Daily <input type="checkbox"/> Average Daily Period: _____	<input type="checkbox"/> Daily <input type="checkbox"/> Average Daily Period: _____	<input type="checkbox"/> Daily <input type="checkbox"/> Average Daily Period: _____

When a non-cash item is received for deposit, when will it begin to accrue interest?	<input type="checkbox"/> On the day of deposit <input type="checkbox"/> First business day after the day of deposit <input type="checkbox"/> No later than the business day credit is received for the item <input type="checkbox"/> Other: _____	<input type="checkbox"/> On the day of deposit <input type="checkbox"/> First business day after the day of deposit <input type="checkbox"/> No later than the business day credit is received for the item <input type="checkbox"/> Other: _____	<input type="checkbox"/> On the day of deposit <input type="checkbox"/> First business day after the day of deposit <input type="checkbox"/> No later than the business day credit is received for the item <input type="checkbox"/> Other: _____
Maturity Options	<input type="checkbox"/> Single Maturity (fixed term, not automatically renewable) <input type="checkbox"/> Automatic Renewal <input type="checkbox"/> Required Notice	<input type="checkbox"/> Single Maturity (fixed term, not automatically renewable) <input type="checkbox"/> Automatic Renewal <input type="checkbox"/> Required Notice	<input type="checkbox"/> Single Maturity (fixed term, not automatically renewable) <input type="checkbox"/> Automatic Renewal <input type="checkbox"/> Required Notice
Term of Deposit	<input type="checkbox"/> _____ Day(s) <input type="checkbox"/> _____ Week(s) <input type="checkbox"/> _____ Month(s) <input type="checkbox"/> _____ Year(s)	<input type="checkbox"/> _____ Day(s) <input type="checkbox"/> _____ Week(s) <input type="checkbox"/> _____ Month(s) <input type="checkbox"/> _____ Year(s)	<input type="checkbox"/> _____ Day(s) <input type="checkbox"/> _____ Week(s) <input type="checkbox"/> _____ Month(s) <input type="checkbox"/> _____ Year(s)
Renewal Term	<input type="checkbox"/> Same as the original term <input type="checkbox"/> Other: _____	<input type="checkbox"/> Same as the original term <input type="checkbox"/> Other: _____	<input type="checkbox"/> Same as the original term <input type="checkbox"/> Other: _____
Interest Rate at Renewal	<input type="checkbox"/> Same rate as offered on new accounts with the same term. <input type="checkbox"/> Other: _____	<input type="checkbox"/> Same rate as offered on new accounts with the same term. <input type="checkbox"/> Other: _____	<input type="checkbox"/> Same rate as offered on new accounts with the same term. <input type="checkbox"/> Other: _____
Grace Period	<input type="checkbox"/> _____ calendar days <input type="checkbox"/> _____ business days	<input type="checkbox"/> _____ calendar days <input type="checkbox"/> _____ business days	<input type="checkbox"/> _____ calendar days <input type="checkbox"/> _____ business days
Preventing Renewal	<input type="checkbox"/> Providing ... <ul style="list-style-type: none"> <input type="checkbox"/> Written notice <input type="checkbox"/> Telephone notice <input type="checkbox"/> Written or telephone notice <input type="checkbox"/> Withdrawing the funds at maturity <input type="checkbox"/> Other: _____	<input type="checkbox"/> Providing ... <ul style="list-style-type: none"> <input type="checkbox"/> Written notice <input type="checkbox"/> Telephone notice <input type="checkbox"/> Written or telephone notice <input type="checkbox"/> Withdrawing the funds at maturity <input type="checkbox"/> Other: _____	<input type="checkbox"/> Providing ... <ul style="list-style-type: none"> <input type="checkbox"/> Written notice <input type="checkbox"/> Telephone notice <input type="checkbox"/> Written or telephone notice <input type="checkbox"/> Withdrawing the funds at maturity <input type="checkbox"/> Other: _____
Does this account contain a callable feature?	<input type="checkbox"/> Yes. Please specify: ____ <input type="checkbox"/> No	<input type="checkbox"/> Yes. Please specify: ____ <input type="checkbox"/> No	<input type="checkbox"/> Yes. Please specify: ____ <input type="checkbox"/> No
Interest Earnings Upon Final Maturity	<input type="checkbox"/> Funds placed in an interest earning account <input type="checkbox"/> Funds placed in a non-interest earning account <input type="checkbox"/> Funds paid directly to account holder	<input type="checkbox"/> Funds placed in an interest earning account <input type="checkbox"/> Funds placed in a non-interest earning account <input type="checkbox"/> Funds paid directly to account holder	<input type="checkbox"/> Funds placed in an interest earning account <input type="checkbox"/> Funds placed in a non-interest earning account <input type="checkbox"/> Funds paid directly to account holder

Early Withdrawal Penalty	<input type="checkbox"/> May be imposed <input type="checkbox"/> Will be imposed <input type="checkbox"/> No penalty applies	<input type="checkbox"/> May be imposed <input type="checkbox"/> Will be imposed <input type="checkbox"/> No penalty applies	<input type="checkbox"/> May be imposed <input type="checkbox"/> Will be imposed <input type="checkbox"/> No penalty applies
Early Withdrawal Penalty Amount	<input type="checkbox"/> One months interest <input type="checkbox"/> Three months interest <input type="checkbox"/> Six months interest <input type="checkbox"/> Seven day's interest if the withdrawal is made within the first six days <input type="checkbox"/> The greatest of all interest on the amount withdrawn or seven days interest on the amount withdrawn <input type="checkbox"/> Other: _____	<input type="checkbox"/> One months interest <input type="checkbox"/> Three months interest <input type="checkbox"/> Six months interest <input type="checkbox"/> Seven day's interest if the withdrawal is made within the first six days <input type="checkbox"/> The greatest of all interest on the amount withdrawn or seven days interest on the amount withdrawn <input type="checkbox"/> Other: _____	<input type="checkbox"/> One months interest <input type="checkbox"/> Three months interest <input type="checkbox"/> Six months interest <input type="checkbox"/> Seven day's interest if the withdrawal is made within the first six days <input type="checkbox"/> The greatest of all interest on the amount withdrawn or seven days interest on the amount withdrawn <input type="checkbox"/> Other: _____
Early Withdrawal Penalty Rate Reduction	<input type="checkbox"/> Interest rate for the remainder of the term will not be reduced. <input type="checkbox"/> Interest rate may/will be reduced <input type="checkbox"/> Interest rate: _____ <input type="checkbox"/> Other: _____	<input type="checkbox"/> Interest rate for the remainder of the term will not be reduced. <input type="checkbox"/> Interest rate may/will be reduced <input type="checkbox"/> Interest rate: _____ <input type="checkbox"/> Other: _____	<input type="checkbox"/> Interest rate for the remainder of the term will not be reduced. <input type="checkbox"/> Interest rate may/will be reduced <input type="checkbox"/> Interest rate: _____ <input type="checkbox"/> Other: _____
Can additional Deposits be made into the account?	<input type="checkbox"/> Yes How many: _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes How many: _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes How many: _____ <input type="checkbox"/> No
Principal Withdrawal Limitations	<input type="checkbox"/> May not be withdrawn during the term <input type="checkbox"/> May be withdrawn, subject to penalty <input type="checkbox"/> Unlimited withdrawals, and subject to penalty <input type="checkbox"/> Other: _____	<input type="checkbox"/> May not be withdrawn during the term <input type="checkbox"/> May be withdrawn, subject to penalty <input type="checkbox"/> Unlimited withdrawals, and subject to penalty <input type="checkbox"/> Other: _____	<input type="checkbox"/> May not be withdrawn during the term <input type="checkbox"/> May be withdrawn, subject to penalty <input type="checkbox"/> Unlimited withdrawals, and subject to penalty <input type="checkbox"/> Other: _____
Interest Withdrawal Limitations	<input type="checkbox"/> May be withdrawn without penalty <input type="checkbox"/> May not be withdrawn <input type="checkbox"/> May be withdrawn, subject to penalty <input type="checkbox"/> May be withdrawn if periodic interest payments were arranged at account opening <input type="checkbox"/> Other: _____	<input type="checkbox"/> May be withdrawn without penalty <input type="checkbox"/> May not be withdrawn <input type="checkbox"/> May be withdrawn, subject to penalty <input type="checkbox"/> May be withdrawn if periodic interest payments were arranged at account opening <input type="checkbox"/> Other: _____	<input type="checkbox"/> May be withdrawn without penalty <input type="checkbox"/> May not be withdrawn <input type="checkbox"/> May be withdrawn, subject to penalty <input type="checkbox"/> May be withdrawn if periodic interest payments were arranged at account opening <input type="checkbox"/> Other: _____
Interest Withdrawal Limitations - Details	<input type="checkbox"/> Only credited interest can be withdrawn <input type="checkbox"/> Accrued interest may be withdrawn	<input type="checkbox"/> Only credited interest can be withdrawn <input type="checkbox"/> Accrued interest may be withdrawn	<input type="checkbox"/> Only credited interest can be withdrawn <input type="checkbox"/> Accrued interest may be withdrawn
Minimum / Maximum Withdrawal	\$ _____	\$ _____	\$ _____

Offer Bonuses?	<input type="checkbox"/> Yes, explain: _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes, explain: _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes, explain: _____ <input type="checkbox"/> No
Minimum Balance to Open the Account	\$ _____	\$ _____	\$ _____
Minimum Balance to Avoid Fees (i.e. Monthly Service Charge Fee)	Fee Based On: <input type="checkbox"/> Single Balance <input type="checkbox"/> Tiered Balance Balance Method: <input type="checkbox"/> Daily <input type="checkbox"/> Average Daily When does the fee apply: _ _____	Fee Based On: <input type="checkbox"/> Single Balance <input type="checkbox"/> Tiered Balance Balance Method: <input type="checkbox"/> Daily <input type="checkbox"/> Average Daily When does the fee apply: _ _____	Fee Based On: <input type="checkbox"/> Single Balance <input type="checkbox"/> Tiered Balance Balance Method: <input type="checkbox"/> Daily <input type="checkbox"/> Average Daily When does the fee apply: _ _____
Account Specific Fees (fees that <u>only</u> apply to this product)			
Other Contract Terms (flows to the Signature Card)			
Other Disclosure Terms (flows to the TISA)			
FACT ACT (disclose negative information required by Reg V at account opening) Consumer only	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Funds Availability Policy Worksheet
Select all that are applicable
Please make copies for additional policies if needed

Product Name	
Funds Availability applies to...	<input type="checkbox"/> All deposit accounts <input type="checkbox"/> Transaction accounts <input type="checkbox"/> All checking & savings accounts <input type="checkbox"/> Other: _____
Teller Cutoff Times	
Funds deposited by check are available for withdrawal...	<input type="checkbox"/> The next business day <input type="checkbox"/> On a delayed basis <input type="checkbox"/> Immediately <input type="checkbox"/> On the same day
Different Funds Availability Policy	<input type="checkbox"/> Policy is the same regardless of where funds are deposited <input type="checkbox"/> Policy differs depending on where funds are deposited. Explain: _____
Are deposits at ATM's allowed?	<input type="checkbox"/> Yes; Cutoff time: _____ <input type="checkbox"/> No
Delays	<input type="checkbox"/> Longest delay imposed on a case-by-case basis: <input type="radio"/> Second business day <input type="radio"/> Third business day <input type="radio"/> Fourth business day <input type="radio"/> Fifth business day <input type="radio"/> \$400 cash rule <input type="checkbox"/> Longest delay on a safeguard exception basis: <input type="radio"/> Seventh business day <input type="radio"/> Eighth business day <input type="radio"/> Ninth business day <input type="radio"/> Tenth business day <input type="radio"/> Eleventh business day <input type="radio"/> Other: _____
Holds on Other Funds	<input type="checkbox"/> Cashing Checks: <input type="radio"/> Any account the customer has with us. <input type="radio"/> Other: _____ <input type="checkbox"/> Cash back on Current Deposits: <input type="radio"/> The account to which the deposit was made. <input type="radio"/> Any account the customer has with us. <input type="radio"/> Other: _____
A different policy applies for the availability of funds for new accounts than for established accounts?	<input type="checkbox"/> Yes. Complete the next section. <input type="checkbox"/> No. Skip the next section.
Availability...	<input type="checkbox"/> Priority items are available sooner than Reg. CC requires. <input type="checkbox"/> When are all other types of deposits available for withdrawal: <input type="radio"/> _____ business day <input type="radio"/> Determined by the routing number <input type="radio"/> Not determined by the routing number

Electronic Funds Transfer Policy Worksheet

Select all that are applicable

Please make copies for additional policies if needed

Product Name	
Direct Deposits	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____
Preauthorized Withdrawals	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____
Include Telephone Transactions in this policy?	<input type="checkbox"/> Yes, complete the following sections. <input type="checkbox"/> No, skip down to the section referring to ATMs.
Access Phone Number, Plan Name & Hours	
Required to access the account by telephone	<input type="checkbox"/> Personal Identification Number (PIN) <input type="checkbox"/> Touch Tone Phone <input type="checkbox"/> Account Number(s) <input type="checkbox"/> Social Security Number <input type="checkbox"/> Other: _____
Transfer funds from & to what accounts?	<input type="checkbox"/> Checking to checking <input type="checkbox"/> Savings to checking <input type="checkbox"/> Checking to savings <input type="checkbox"/> Savings to savings <input type="checkbox"/> Other: _____
Make payments from & to what accounts?	<input type="checkbox"/> Checking to _____ <input type="checkbox"/> Savings to _____ <input type="checkbox"/> Other: _____
Obtain account balances?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Obtain a withdrawal history?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Obtain a deposit history?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Obtain a transaction history?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Can account holders access their accounts through ATMs?	<input type="checkbox"/> Yes, complete the following sections. <input type="checkbox"/> No, skip down to the section referring to Debit Cards.
ATM Card Name	

Required to access the account by ATM	<input type="checkbox"/> Personal Identification Number (PIN) <input type="checkbox"/> Account Number(s) <input type="checkbox"/> Social Security Number <input type="checkbox"/> Other: _____
What accounts can deposits be made to using an ATM?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____
Cash withdrawals from an ATM from what accounts?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____
Transfer funds from & to what accounts?	<input type="checkbox"/> Checking to checking <input type="checkbox"/> Savings to checking <input type="checkbox"/> Checking to savings <input type="checkbox"/> Savings to savings <input type="checkbox"/> Other: _____
Make payments from & to what accounts?	<input type="checkbox"/> Checking to _____ <input type="checkbox"/> Savings to _____ <input type="checkbox"/> Other: _____
Obtain account balances?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Obtain a withdrawal history?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Obtain a deposit history?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Obtain a transaction history?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Include debit/point-of-sale card information in this policy?	<input type="checkbox"/> Yes, complete the following sections. <input type="checkbox"/> No, skip down to the section referring to Computer Transactions.
Card Name	
Account(s) can be accessed using the debit card?	<input type="checkbox"/> Checking <input type="checkbox"/> Other: _____
What point-of-sale transactions can be made?	<input type="checkbox"/> Purchase goods: ○ In person ○ By phone ○ Online (Internet) <input type="checkbox"/> Pay for services: ○ In person ○ By phone ○ Online (Internet) <input type="checkbox"/> Cash back from a participating merchant or financial institution <input type="checkbox"/> Other: _____
Can point-of-sale transactions be reversed?	<input type="checkbox"/> Yes, please explain: _____ <input type="checkbox"/> No.

Can the debit card be used to access accounts through ATMs?	<input type="checkbox"/> Yes, complete the following sections. <input type="checkbox"/> No, skip down to the section referring to Computer Transactions.
Required to access the account by ATM	<input type="checkbox"/> Personal Identification Number (PIN) <input type="checkbox"/> Account Number(s) <input type="checkbox"/> Social Security Number <input type="checkbox"/> Other: _____
What accounts can deposits be made to using an ATM?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____
Cash withdrawals from an ATM from what accounts?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____
Transfer funds from & to what accounts?	<input type="checkbox"/> Checking to checking <input type="checkbox"/> Savings to checking <input type="checkbox"/> Checking to savings <input type="checkbox"/> Savings to savings <input type="checkbox"/> Other: _____
Make payments from & to what accounts?	<input type="checkbox"/> Checking to _____ <input type="checkbox"/> Savings to _____ <input type="checkbox"/> Other: _____
Obtain account balances?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Obtain a withdrawal history?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Obtain a deposit history?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Obtain a transaction history?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Include computer transaction in this policy?	<input type="checkbox"/> Yes, complete the following sections. <input type="checkbox"/> No, skip down to the section referring to Bill Payment Service.

Access Plan Name, Phone Number & Internet Address	
Required to access the account(s) by telephone	<input type="checkbox"/> Personal Identification Number (PIN) <input type="checkbox"/> Touch Tone Phone <input type="checkbox"/> Account Number(s) <input type="checkbox"/> Social Security Number <input type="checkbox"/> Other: _____
Transfer funds from & to what accounts?	<input type="checkbox"/> Checking to checking <input type="checkbox"/> Savings to checking <input type="checkbox"/> Checking to savings <input type="checkbox"/> Savings to savings <input type="checkbox"/> Other: _____
Make payments from & to what accounts?	<input type="checkbox"/> Checking to _____ <input type="checkbox"/> Savings to _____ <input type="checkbox"/> Other: _____
Obtain account balances?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Obtain a withdrawal history?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Obtain a deposit history?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Obtain a transaction history?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Line of Credit <input type="checkbox"/> Certificates of Deposit <input type="checkbox"/> Other: _____
Include bill payment service in this policy?	<input type="checkbox"/> Yes, complete the following sections. <input type="checkbox"/> No, skip down to the section referring to Confidentiality.
Bill Payment Service Name	
Can the account holder access the service by computer?	<input type="checkbox"/> Yes. Complete the next two sections. <input type="checkbox"/> No.
Internet Address	

Required to access the account(s) by computer	<input type="checkbox"/> User Name and Password <input type="checkbox"/> Account Number(s) <input type="checkbox"/> Other: _____
Can the account holder access the service by telephone?	<input type="checkbox"/> Yes. Complete the next two sections. <input type="checkbox"/> No.
Telephone Number	
Required to access the account(s) by telephone	<input type="checkbox"/> Personal Identification Number (PIN) <input type="checkbox"/> Touch Tone Phone <input type="checkbox"/> Account Number(s) <input type="checkbox"/> Social Security Number <input type="checkbox"/> Other: _____
Can the account holder access the service by another method?	<input type="checkbox"/> Yes. Complete the next section. <input type="checkbox"/> No.
What do account holders need to access the service?	
Transfer funds to & from what accounts	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____
Account holders can make prearranged payments to:	
Confidentiality – under what circumstances is account information shared with third parties?	<input type="checkbox"/> Want a cross-reference to our privacy disclosure, which is provided separately, in addition to the basic disclosure. <input type="checkbox"/> The account holder's written permission is obtained. <input type="checkbox"/> Other: _____
How should the Consumer Liability for Unauthorized Transfers and Error Resolution text be generated?	<input type="checkbox"/> Standard Reg. E (and applicable state law) rules. <input type="checkbox"/> Want to use suggested text of standard Reg. E (and applicable state law) rules as a starting point. <input type="checkbox"/> Want to use suggested language that includes MasterCard point-of-sale card as a starting point. (Option only applicable if your institution indicated there is a point-of-sale card.) <input type="checkbox"/> Want to use suggested language that includes VISA point-of-sale card as a starting point. (Option only applicable if your institution indicated there is a point-of-sale card.)
Periodic Statements	<input type="checkbox"/> Monthly statements go to _____ accounts. <input type="checkbox"/> Quarterly statements go to _____ accounts, if the only possible electronic transfers to or from the account are preauthorized deposits. <input type="checkbox"/> Passbook accounts will be updated on presentation only. <input type="checkbox"/> _____ accounts that are accessible by electronic fund transfer other than direct deposit will get monthly statements, otherwise quarterly statements if there are none.
Limitations on EFTs because of security reasons are not disclosed.	<input type="checkbox"/> ATM <input type="checkbox"/> By debit card <input type="checkbox"/> By telephone <input type="checkbox"/> By computer

Substitute Checks Policy Worksheet
Select all that are applicable
Please make copies for additional policies if needed

Product Name	
Optional Introductory Text/Check Illustration	<input type="checkbox"/> Do not include an introduction/sample check image, print only the required regulatory disclosure. <input type="checkbox"/> Include introductory text and sample check image along with required regulatory disclosure.
Number of business days you reserve to respond to a consumer's recrediting claim before providing an initial refund? (cannot exceed 10 days)	
Maximum dollar amount you will refund if you have not responded to the consumer's recrediting claim within the above time frame? (cannot be less than \$2500)	
Maximum number of calendar days you will wait before providing the remainder of the refund? (cannot exceed 45 days)	
How many days does a consumer have to submit a recrediting claim after receiving a substitute check? (cannot be less than 40 days)	
When a consumer makes a recrediting claim, what check identifying information will you receive? (check all that apply)	<input type="checkbox"/> The check number <input type="checkbox"/> The amount of the check <input type="checkbox"/> The name of the person to whom the check is written <input type="checkbox"/> Other: _____

Business Debit Card Application
Select all that are applicable
Please make copies for additional policies if needed

Card Name	
Accounts that can be accessed with debit card	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____
Type of transactions	<input type="checkbox"/> ATM Transactions ONLY <input type="checkbox"/> Point of Sale and ATM Transactions <input type="checkbox"/> PIN required for POS transactions
What accounts can deposits be made to using an ATM?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____
Cash withdrawals from an ATM from what accounts?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____
Transfer funds from & to what accounts using an ATM?	<input type="checkbox"/> Checking to checking <input type="checkbox"/> Savings to checking <input type="checkbox"/> Checking to savings <input type="checkbox"/> Savings to savings <input type="checkbox"/> Other: _____
Make payments from & to what accounts using an ATM?	<input type="checkbox"/> Checking to _____ <input type="checkbox"/> Savings to _____ <input type="checkbox"/> Other: _____
Obtain account balances using an ATM?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____
Obtain a withdrawal history using an ATM?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____
Obtain a deposit history using an ATM?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____
Obtain a transaction history using an ATM?	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other: _____

Point of Sale brand that applies	<input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Neither MasterCard or Visa
Foreign Currency Conversion & Cross Border transactions	<input type="checkbox"/> Applies <input type="checkbox"/> Does not apply
Include statement advising card holders against the use of card for illegal transactions	<input type="checkbox"/> YES <input type="checkbox"/> NO
Order of Payment	<input type="checkbox"/> Card transactions are paid in order received. <input type="checkbox"/> Other _____ _____
Offer a commercial overdraft protection program that a Card transaction may trigger in some cases:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Stop Payment	<input type="checkbox"/> Include a stop payment paragraph <input type="checkbox"/> Do not accept stop payment request
Terminal Transactions	<input type="checkbox"/> Withdrawals completed and charged to the account _____ <input type="checkbox"/> Deposits will be completed _____ <input type="checkbox"/> Transfers will be completed _____ <input type="checkbox"/> Payments will be completed _____
Point of Sale Reversal	<input type="checkbox"/> YES <input type="checkbox"/> NO
Include Reg. D Transaction limitations in this Business card Agreement	<input type="checkbox"/> YES <input type="checkbox"/> NO
Transaction Limitations	<input type="checkbox"/> For security reasons, some ATM limits may apply <input type="checkbox"/> For security reasons, some POS limits may apply
Periodic Statements	<input type="checkbox"/> Monthly statements go to _____accounts. <input type="checkbox"/> Monthly statements will be sent if Card transactions have occurred in the past month, otherwise a quarterly statement will be sent for _____. <input type="checkbox"/> Other: _____

