



Business Online Banking Application

Please complete this application and return to Customer Service at Waycross Bank & Trust.

Business Name _____ Tax ID # _____

Street Address _____

Mailing Address _____
(if other than street address)

City _____ State _____ Zip Code _____

Email address _____

Accounts to Access

Please list the accounts for which you wish online access. Account numbers are not listed online for your security, so please provide a nickname for each account (example: Operating Account, Tax Account, etc.). You may change the nickname at any time.

Account #1 _____ Account Nickname _____

Account #2 _____ Account Nickname _____

Account #3 _____ Account Nickname _____

Account #4 _____ Account Nickname _____

By signing below, I authorize Waycross Bank & Trust to initiate Online Banking with the above listed accounts. I understand I must be an owner of the account to have access to the account online. I understand Waycross Bank & Trust will provide me with an Online Banking ID Number and a PIN/Password to access my account. I will not share this information with any third party and that no third party shall be authorized to conduct Online Banking for me. Should I believe my Online Bank ID Number and/or PIN/Password becomes compromised at any time, I understand I must notify Waycross Bank & Trust immediately and hold Waycross Bank & Trust harmless of any losses that may occur due to this negligence. I agree to abide by the terms and provisions of Waycross Bank & Trust's Online Banking provided when I set up my Online Banking account.

I request to have Bill Pay added to my Online Banking _____ (Customer Initials)

I request information on how to have my account statements delivered electronically _____ (Customer Initials)
Please note that in order to receive eStatements, a simple enrollment process must be completed online once you have access to Online Banking. Any Customer Service Representative would be happy to assist you with setting this up.

Authorized Signature

Date

Authorized Printed Name

Bank Personnel

Bank Use Only

CIF # _____ Identifying Number _____

Date Received _____ Date Added _____