

NEW ACCOUNT INFORMATION

Important Information for Opening a New Account

To help the government fight the funding of terrorism and money laundering activities, Federal Law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

Which this means for you: When you open an account, we will ask you for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other verifying documents.

Please check one: **Current Customer** **New Customer**

First Name		Middle	Last
Physical Address		City	State Zip
Mailing Address		City	State Zip
Home Phone #		Work Phone #	
SS # or TIN #		Cell Phone #	
DL / Picture ID & Expiration Date		Date of Birth	
Employer Name & Annual Salary		Occupation	
Email Address		Mothers Maiden Name	

APPLICANT #2: (Select One) JOINT OWNER AUTH SIGNER PAY ON DEATH BENEFICIARY

First Name		Middle	Last
Physical Address		City	State Zip
Mailing Address		City	State Zip
Home Phone #		Work Phone #	
SS # or TIN #		Cell Phone #	
DL / Picture ID & Expiration Date		Date of Birth	
Employer Annual Salary		Occupation	
Email Address		Mothers Maiden Name	

ID's ACCEPTED:

Identifying Documents: Social Security Card or US Alien Identification Card.

Primary Verifying Information: Valid State DL, Passport, or Other Government Issued ID with Photo.

Secondary Verifying Information: Texas Concealed Handgun License, Firearm License, Insurance Card, Utility Bill, Property Tax Bill, Voter Registration Card, College ID Card, or Major Credit Card.

Please select the type of account(s) you wish to open:			
<input type="checkbox"/>	Checking Account	<input type="checkbox"/>	Life Insurance
<input type="checkbox"/>	Savings Account	<input type="checkbox"/>	Investment Products
<input type="checkbox"/>	Certificates of Deposit	<input type="checkbox"/>	College Saving Fund
<input type="checkbox"/>	Individual Retirement Accounts	<input type="checkbox"/>	Retirement Planning
<input type="checkbox"/>	Safe Deposit Box	<input type="checkbox"/>	Other:
<input type="checkbox"/>	Loan Products	<input type="checkbox"/>	

By signing below, I certify that the above information is true and correct. I hereby authorize CapTex Bank to verify my information including such procedures as obtaining a credit report, if necessary.

Signed: _____ Date: _____

Signed: _____ Date: _____

New account information sheet reviewed by: _____ Date: _____