



**Service Requested** (please check all the apply)

Internet Banking

Bill Pay \_\_\_\_\_ Bill Pay Account Number (must be a checking account)

Sign up for Email Statements On-line.

**Service Agreement**

By signing below: (1) I will be bound by the terms and conditions of Tri-County Bank's Depository Agreement which Tri-County Bank may amend from time to time. (2) I understand that I must safeguard my password. I authorize Tri-County Bank and its agent to follow any instructions transmitted by use of my password. (3) I authorize Tri-County Bank to disclose information about any of my accounts to third parties (including payees) in order to complete transactions, using NetTeller. I also authorize my payees to disclose to Tri-County Bank and/or its agents information regarding my account(s) with such parties in order to complete transactions using NetTeller, including resolving questions regarding such transactions.

\_\_\_\_\_  
Account Holder

\_\_\_\_\_  
Date

I, by signature above, certify that everything that has been stated in this application and on any attachments is correct. Tri-County Bank is authorized to retain this application whether or not it is approved. By completing and submitting this form, I accept the terms and agreements outlined in the Online Access Agreement and Electronic Funds Transfer Act Disclosure. I understand that a user ID and temporary password will be issued to me within 48 hours of receipt of this application. I must change the temporary password to a private password the first time I log on to the Internet Banking System.