Northern State Online Internet Banking Application PERSONAL & SOLE PROPRIETORSHIP

To apply for online banking services, **complete and sign** the application. Take it to your nearest Northern State Bank location or mail it to: *Attn: Online Banking*, 321 Main St. West, P.O. Box 617, Ashland, WI 54806. After processing and approval, we will mail your confirmation and your online banking ID. You will receive your PIN under separate mailing.

ACCOUNT OWNER (Joint own	ners must apply separately)
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Name (first, middle initial, last)	
Social Security Number	Date of Birth
Street Address	
P.O. Box	City, State, Zip
Home Phone	Cell Phone
E-mail Address	

ACCOUNT INFORMATION

accounts via the Internet banking services.

- Applicant must be authorized signer on each account.
- If any account is held jointly and co-owner(s) wish to use this service, they must complete a separate application.
- If an account(s) requires more than one signature for withdrawal, the required number of signers must complete separate applications. When we have the approval of all signers, you agree that we may make the service available to all signers and that any one signer may act alone in conducting transactions with this service.
- Account types: checking, savings, loan, CD, IRA, safety deposit box.
- Pseudo Name (optional): How you want the account to appear online.

	Account Number	Account Type	Account Pseudo Name	
ex.	12345689	Checking	My checking	
1				
2				
3				
4				
5				
6				
СНЕ	CK ONE:			
I want to sign up for Northern State Online Internet banking services.				
I want to apply for Northern State Online Internet banking services and Bill Pay.				
Hold Harmless Agreement: I agree to defend, hold harmless and indemnify Northern State Bank from and against any and all claims of				

Account Owner Signature: By signing below, I certify that I have read and agree to the terms set forth in the disclosure(s) and *Northern State Online* Agreement. I understand that Northern State Bank reserves the right to change or add to existing services or change the conditions of those services from time to time. I have made/received a copy of the Agreement for my records.

any nature arising out of any such access by a person I have authorized, permitted or enabled to have access to my Northern State Bank

Signature	Date