

**Personal Information** — All fields are required.

Name/Primary Contact:

TIN/SSN:

Address:

Primary Phone:

City:  State:  Zip:

E-mail Address:

Name/Secondary Contact (If applicable):

TIN/SSN:

Address:

Primary Phone:

City:  State:  Zip:

E-mail Address:

**Account Information**

Please complete a separate sheet for additional accounts.

- Please grant NetTeller Internet banking access for all of my accounts.**
- Please grant NetTeller Internet banking access only for those accounts listed to the right.**

Account Name	Account No.
List accounts you wish to have access for NetTeller Online Banking	List corresponding Account Numbers
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

**Signatures**

By signing below, I authorize The Neffs National Bank to issue a temporary password on my behalf which I will be forced to change to a private password the first time I login to the system. I understand that access to the system is governed by the On-line Access Agreement and Privacy Policy, a copy of which I have reviewed, and I agree to its terms.

**Each undersigned acknowledges that, for each account listed on the application, NetTeller Internet banking access approval is subject to the undersigned's being an owner or authorized signer on the account.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**In order to ensure the security/confidentiality of this information, please complete, print and return this application to us by either mailing to The Neffs National Bank, PO Box 10, Neffs, PA 18065 OR delivering to The Neffs National Bank at 5629, Rt. 873, Neffs, PA. Upon review of the information, we will mail your User ID number to you.**