

**The Neffs National Bank
Business / Organization Neffs Online Banking Application**

Business / Organization Information (All fields are required)

New Application

Revised Application (Current NetTeller # _____)

Name of Business / Organization:

EIN:

Address:

Phone # for Business / Organization:

City: State: Zip:

Business's Primary E-Mail Address:

Authorized Signer(s) / User(s):

Name / Primary Contact: Email Address:

Social Security # Date of Birth Phone #

Name / Second Contact: Email Address:

Social Security # Date of Birth Phone #

Name / Third Contact: Email Address:

Social Security # Date of Birth Phone #

Name / Fourth Contact: Email Address:

Social Security # Date of Birth Phone #

Account Information (Please complete a separate sheet for additional accounts.)

Account Type
List accounts you wish
to access online

Account Number
List Corresponding
Account Numbers

Account Typ
List accounts you wish
to access online

Account Number
List Corresponding
Account Numbers

Requested Cash Management Modules (Monthly fees apply):

ACH Origination*

Positive Pay*

RDC/mRDC*

Wire Input**

*Additional application/agreement) required

**CM Wire Transfer App Required

By signing below, the undersigned acknowledges any account(s) not enrolled in Paperless Statements will be charged a \$5 monthly fee for each statement mailed. After logging in, the undersigned may enroll each account by clicking on the Paperless Statement tab and following the instructions.

Signature: _____

Date: _____

Signature: _____

Date: _____

Signature: _____

Date: _____

Signature: _____

Date: _____

MAIL, FAX, OR DROP-OFF COMPLETED FORM TO:

**The Neffs National Bank
Attn: Deposit Operations
5629 Route 873, P.O. Box 10
Neffs, PA 18065-0010**

**Fax: 610-767-1890
Phone: 610-767-3875**

Teller # or initials _____