

The Bank of South Carolina ESafe

Internet Banking Enrollment Form

Application Information

On joint accounts, each signer must submit a separate application. On Business accounts, only authorized signers may apply and each must submit a separate application.

Name: _____

Address: _____

City State Zip: _____

Phone #: _____ Tax ID/ SSN: _____

Email Address: _____

Account Information

Inquiry Only

Account Title: _____ Primary Account: _____

Signature

By signing this form, I acknowledge that I have read and agree to the terms and conditions and I authorize The Bank of South Carolina to issue a temporary password on my behalf, which I must change to a private password of my choosing the first time I log in to The Bank of South Carolina's ESafe site.

Signature: _____ Date: _____

Employee Name: _____

Operations use only

Password Assigned Completed by: _____

Customer Notified Date: _____