

# 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: \_\_\_\_\_