

CUSTOMER

Company Name \_\_\_\_\_ Tax ID \_\_\_\_\_  EIN  SSN

Mailing Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Branch \_\_\_\_\_

Type of Business \_\_\_\_\_ Number of Years in Operation \_\_\_\_\_ Under Present Management Since \_\_\_\_\_

ACH ORIGINATION SERVICES

Indicate Type(s) of ACH Origination Services

Payroll Direct Deposit *Send electronic credits to employees*  FSBB Online Banking Cash Management (provided by Bank)

Federal/State Tax Payments *Remit Federal and State of Texas tax payments electronically. A Tax Template Request Form is also available.*

Federal  Add  Delete Tax Type(s)

State of Texas  Add  Delete

ACH Payments/Credits *Send funds to other accounts*

Provide Details \_\_\_\_\_

ACH Receipts/Debits *Initiate from clients' accounts into your account*

Provide Details \_\_\_\_\_

ACH ACTIVITY SURVEY

Indicate ACH Activity (check all responses that apply, if applicable)

Requested Total Daily ACH Limit \$ \_\_\_\_\_ Processing Frequency  Daily  Weekly  Bi-Weekly  Monthly  Other

Average Entry Amount (An Entry is an Individual Transaction, e.g. Payment or Payroll Item) \$ \_\_\_\_\_ Number of Files (per month) \_\_\_\_\_

Average File Amount (A File is the Total of the Entries (Credit or Debit) \$ \_\_\_\_\_ Total Amount (per month)\$ \_\_\_\_\_

Indicated all types of transactions used:  Business to Business Account  Business to Personal Account  Personal to Business Account

How does your customer authorize payments?  Written authorization on file  Website/Telephone  Other \_\_\_\_\_

Will you generate a NACHA formatted file?  Yes  No

Do you obtain a voided check/deposit slip?  Yes  No

ACCOUNTS

List all accounts subject o ACH activity

Account Number	Account Name	Account Type
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PRIMARY CONTACT

Primary Contact Name \_\_\_\_\_ SSN \_\_\_\_\_ Title \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_  
 Email Address \_\_\_\_\_ City Born In \_\_\_\_\_ DOB \_\_\_\_\_  
 Relationship to Entity: \_\_\_\_\_

SECONDARY CONTACT

Secondary Contact Name \_\_\_\_\_ SSN \_\_\_\_\_ Title \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_  
 Email Address \_\_\_\_\_ City Born In \_\_\_\_\_ DOB \_\_\_\_\_  
 Relationship to Entity: \_\_\_\_\_

SIGNATURE

I, the undersigned, do hereby acknowledge that I am authorized under the company/entity's Electronic Banking Resolution to act on behalf of this company, group, association or organization. In addition, I acknowledge receipt of and agree to the terms and conditions set forth in the ACH Origination Agreement.

Authorized Signature \_\_\_\_\_ Printed name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Bank Use Only

ACCOUNT

Deposit Activity

Primary Account Number \_\_\_\_\_ YTD Paid NSF \_\_\_\_\_ YTD Returned NST \_\_\_\_\_ YTD Avg. Bal \_\_\_\_\_  
 Customer Number \_\_\_\_\_ Account(s) Since \_\_\_\_\_

Loan Activity

Aggregate Exposure \_\_\_\_\_ Date Last Financial Review \_\_\_\_\_  
 Exposure Description \_\_\_\_\_

Required Documents

Business Online Banking Agreement  Electronic Banking Resolution

APPROVAL

Aggregate Risk Rating

1 - Limited Risk  2 - Moderate Risk  3 - Acceptable Risk  4 - Second Signature Required  5 - Decline

Approved ACH Limit \$ \_\_\_\_\_ Date Next Financial Review \_\_\_\_\_

Approved By: \_\_\_\_\_ Date \_\_\_\_\_

Print Name: \_\_\_\_\_ Title \_\_\_\_\_