Business Online Banking & Bill Pay Application:

Primary User

Business Information	
Legal Business Name: _____	Member Number: _____
Federal Tax Identification Number: _____	Email Address: _____
Business Address: _____	
City: _____	State: _____ Zip: _____

Primary User Information		
First Name: _____	Middle Name: _____	Last Name: _____
Social Security Number: _____	Phone Number: _____	Email Address: _____
Address: _____		
City: _____	State: _____	Zip: _____

Additional Services:

☐ Online/Mobile Banking

☐ Bill Pay*

☐ ACH Origination (Payments)**

*Bill Pay is free for the first three months. For this to remain a free service, one bill must be paid monthly. If not, there is a $5 monthly service fee.

**Additional application and approval required. There is a $12.95 monthly fee for this service, and includes access to the PaymentsFirst education center.

Employee Name:	Teller Number:	Bill Pay ID:	Date: