

# Brattleboro Savings & Loan Debit Card Application

In order to issue a debit card to either signer of a joint account, each owner must fill out a separate application

Personal Debit Card

Business Debit Card

Cardholder Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Business Name if Applicable \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

I wish to access this account for Debit Card use: Checking Account# \_\_\_\_\_

For ATM use only, I wish to also access this account: Savings Account # \_\_\_\_\_

**Authorizations:** By signing below, I am applying for a Brattleboro Savings & Loan Debit Card. I understand this is not a credit card and that the dollar amount of the purchases made with this card will be deducted from my Brattleboro Savings & Loan checking account only. I understand there are daily withdrawal restrictions which are disclosed in the Electronic Funds Transfer disclosure and Debit card agreement. I acknowledge receipt of this disclosure, and I authorize Brattleboro Savings & Loan to verify the information provided above and to request a credit report if necessary. The Brattleboro Savings & Loan Debit Card is available for qualified customers only. Other requirements apply.

If a card is being issued to a minor, the parent when signing, is assuming all responsibility for the card use.

In the case of a business debit card, by signing below you acknowledge receipt of the Debit Business Card Agreement Terms and Conditions in place of the above referenced disclosures. In the case of the authorized user of the debit card changing, you agree to notify us in writing that the individual is no longer authorized to use the card, and you agree to obtain the card from the individual who is no longer an authorized user. The company or organization shall be liable to any authorized or unauthorized use of the card by officers, employees and affiliates of the company or organization.

I/we agree to be bound by the terms and conditions covered in the appropriate Statement and Cardholder Agreement.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature (if under 18) \_\_\_\_\_ Date \_\_\_\_\_

If this box is checked this is an authorization to issue a replacement card and I understand a fee of \$10.00 may be assessed

**FOR BANK USE ONLY:**

New Card for new account

Replacement Card for worn out or broken card (same card # can be used) \*\* \$10.00 fee may apply

New Card for lost or stolen card\*\* old card # must be hot carded and new card number issued\*\*\$10.00 fee may apply, except in cases of fraud

Check here if waiving replacement fee Reason for waiver:  Fraud  Relationship  No fault  Worn

Card Number \_\_\_\_\_ Offset \_\_\_\_\_ CSR Initials \_\_\_\_\_ Date \_\_\_\_\_