

First National Bank of Bangor
Debit Card/ATM Application

FOR BANK USE ONLY	
DATE:	BRANCH:
ACCEPTED BY:	APPROVED BY:

To qualify for a Mastercard Debit Card, you must be over 18 years old or have a parent or guardian co-signer and be an authorized signer on all accounts attached to the card.

Please select card type: Debit Card ATM Card

Please select issue type: New Card Replacement Card**; Reason: Fraud Lost Other (specify): _____

Please select shipping type: Regular First Class (Standard) Next Day Air**

** Fees/charges will be debited from the primary account listed in accordance with the current Schedule of Fees and Charges.

YOUR PERSONAL DETAILS

Cardholder Name _____ Soc Security # _____
(First, Middle Initial, Last)

Date of Birth _____ Primary Telephone _____ Cell Landline

Cardholder Address _____
(Street Address) (City) (State) (Zip Code)

Alternate Mailing (optional) _____
(Street Address) (City) (State) (Zip Code)

EMPLOYMENT DETAILS

Are you? Employed Self Employed Retired Unemployed/Student Current/Last Employer _____

of years employed (Current employer) <2 Yr 2-5 Yrs 5 Yrs + Occupation _____

FINANCIAL INFORMATION

Routing 091803957

Checking Account # _____ Required for Debit card

Savings Account # _____ Required for ATM card, Optional for Debit card

Disclosure

By signing below, I am applying for a First National Bank of Bangor 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 primary First National Bank of Bangor checking account. I authorize First National Bank of Bangor to verify the information provided above and to request a credit report if necessary. The First National Bank of Bangor Debit Card is available for qualified customers only. By signing below, I agree to be bound by the terms and conditions in the appropriate disclosure statement and Cardholder Agreement. **Joint accounts will require a separate application to be completed by each individual who is requesting a Debit Card.**

SIGNATURE

Authorized Signature (18+): _____ Date _____

Print Parent/Guardian Name (if applicable): _____

* Important- Please read and initial the Cardholder Agreement on the back of this application. Failure to do so may result in the denial of your application. *

FOR BANK USE ONLY			
Card Number:	Date Ordered:	Ordered By:	Verified By:
Card Denied Reason:			

Cardholder Agreement

1. First National Bank of Bangor may refuse any request to issue a Debit Card without cause or notice.
2. You agree that, upon receipt of your card, that you shall promptly sign the signature panel in ink.
3. You understand that, after your receipt of the Debit Card, you will create a Personal Identification Number (PIN) when you call to activate your card. You agree you will not share this PIN with anyone and agree that you will not record the PIN on the card.
4. Authorization – You authorize The First National Bank of Bangor to charge your designated account(s) for money disbursed and to credit your designated account(s) for deposits received in connection with transfers involving use of the card, along with any applicable fees as outlined in the current fee schedule.
5. Use of Card – Your card is not transferable and remains the property of First National Bank of Bangor. You agree to return the card to us immediately upon our demand. First National Bank of Bangor can revoke or terminate your card without cause or notice. **Only the signer of this application is authorized to use this card, you may not authorize others to use the card. Doing so may terminate your protections.**
6. Card Restrictions –Point of Sale (POS) transactions are limited to **\$1,000** per calendar day. Cash withdrawals from ATMs are limited to **\$500** per calendar day. You understand that the Bank may establish different limits for any cardholders upon its discretion. If you need to use your debit card for more than the daily limit please call Bookkeeping at (608)486-2386, and your limit can be raised for a designated period.
7. Maintenance of Accounts – As long as this Cardholder Agreement remains in effect, you agree to maintain at least one of your designated accounts. Should all your designated accounts be closed, your card privileges will be cancelled, and the Bank may retain your card if you attempt to use it. At least one active checking account needs to be linked to the card, or the card will be converted to an ATM only card.
8. Replacement of Damaged or Lost/Stolen Cards – If your card is lost or stolen, Bank policy requires the customer to reapply by completing a new application. For damaged cards, if you request the Bank to reissue a replacement card to you, you agree to pay a replacement fee for such replacement card, and you agree the Bank may debit your account for this fee. A copy of the current Schedule of Fees and Charges will be provided at your request.
9. Amendments to Cardholder Agreement – We may amend this agreement at any time. We will provide you with written notice at least 30 days before the amendment becomes effective if the amendment will result in increased costs or liability to you. If an immediate change in the Cardholder Agreement is necessary, we may amend the agreement without such prior notice.
10. Notices – Notices sent by us shall be effective when mailed to you at your last address that appears on our records. Apart from as otherwise provided in this agreement, or by applicable law, notices from you to the Bank must be in writing and will be effective when received by the Bank.
11. Collection Expenses – If we must pursue legal means to collect amounts owed to The First National Bank of Bangor under this agreement, you will pay our reasonable expenses, including attorney’s fees, to the extent permitted by applicable law.
12. Joint Accounts – If your designated account(s) is/are a joint account, each account holder may exercise all rights under this Cardholder Agreement individually and shall be jointly and severally liable for any obligations incurred by any such exercise. Joint accounts will require a separate application to be completed by every authorized person who is requesting a Debit Card.
13. Disclosures – Please refer to the disclosure provided to you when you opened your account so that you are aware of your rights under Federal Regulation E (Electronic Funds Transfer Act). If you have misplaced this disclosure it will be provided at your request
14. **Important - Please Read - First National Bank highly recommends the use of your debit card to be limited on internet purchases. Due to the high volume of internet fraud, use of a credit card is encouraged instead of your debit card as it is a safer alternative. If you use your debit card for internet purchases, be sure only to use it on secured sites.**

_____ Initials (18+)