



INSTRUCTIONS

To complete this form on your computer, click next to the item you wish to fill-in and begin typing. Click the PRINT FORM button below to print the form. If you have any questions or need assistance, please call 918-251-5371 or 1-888-255-5371.

FirstNETBANK BUSINESS APPLICATION		
COMPANY NAME:		
CONTACT NAME:	CONTACT TITLE:	
STREET ADDRESS:		
CITY:	STATE:	ZIP:
TELEPHONE:	TAX I.D. NO.:	E-MAIL ADDRESS:
Please provide checking, savings and money market account numbers (for Bank verification purposes).		
Checking Accounts: 1. _____ 2. _____ 3. _____ 4. _____	Money Market / Saving Account: 1. _____ 2. _____ 3. _____ 4. _____	
The FirstNETBANK Business Application must be signed by appropriate Company officer(s), see below, who is also a signer on First National Bank of Broken Arrow Signature Card and Resolution.		
TYPE OF ORGANIZATION (check one) <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 30%;"> Sole Proprietor Corporation </div> <div style="width: 30%;"> Unincorporated Association Partnership </div> <div style="width: 30%;"> Trust Other _____ </div> </div>		
BY SIGNING THIS AGREEMENT, THE PARTIES ACKNOWLEDGE THAT THEY HAVE READ THE ONLINE BANKING TERMS, UNDERSTAND IT AND AGREE TO ALL ITS TERMS AND CONDITIONS.		
NAME: _____	NAME: _____	
Signature: _____	Signature: _____	
Title: _____	Title: _____	
Date: _____	Date: _____	
PLEASE MAIL COMPLETE APPLICATION TO:	First National Bank & Trust Co. P.O. Box 70 Broken Arrow, OK 74013-0070	

Your first-time login PIN will be mailed to the address above once the application has been approved and processed.	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left; padding: 5px;">TO BE COMPLETED BY BANK:</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">Port #</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">Name Line#</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">PIN</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">Processed by:</td> <td style="padding: 5px;">_____</td> </tr> </tbody> </table>	TO BE COMPLETED BY BANK:		Port #	_____	Name Line#	_____	PIN	_____	Processed by:	_____
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Processed by:	_____										

