



**5STAR BANK CHECKING, MONEY MARKET AND SAVINGS  
ACCOUNT APPLICATION**

Enclosed is my check for \$ \_\_\_\_\_ made payable to 5Star Bank. (\$50CK/\$100SV/\$1000MM min.)

**Account Holder Information**

|  |   |                                 |            |            |
|--|---|---------------------------------|------------|------------|
| Name 1 (First, MI, Last)                 | DOB                                     | Soc. Sec. Num                   | Home Phone | Work Phone |
| Name 2 (First, MI, Last)                 | DOB                                     | Soc. Sec. Num                   | Home Phone | Work Phone |
| Mailing Address (Name 1)                 | City                                    | State                           | Zip Code   |            |
| Mailing Address (Name 2, if different)   | City                                    | State                           | Zip Code   |            |
| Driver's License #<br>Name 1:<br>Name 2: | State of issuance<br>Name 1:<br>Name 2: | Exp. Date<br>Name 1:<br>Name 2: |            |            |
| Next of Kin (First, MI, Last)            | Next of Kin Address                     | Next of Kin Phone               |            |            |

**Employment Information**

|                             |          |                            |
|-----------------------------|----------|----------------------------|
| Employer (Name 1)           | Position | Gross Annual Salary*<br>\$ |
| Other Annual Income**<br>\$ | Source   | Monthly Housing/Rent<br>\$ |
| Employer (Name 2)           | Position | Gross Annual Salary*<br>\$ |
| Other Annual Income**<br>\$ | Source   | Monthly Housing/Rent<br>\$ |

\* Include all military benefits (i.e., housing allowance), etc. \*\* Alimony, child support or separate maintenance income need not be revealed if you do not wish to.

**Overdraft Protection**

Would you like to apply for overdraft protection? (Check box if yes)

**Visa CheckMate Card**

|  |  |
|--|--|
| Select Your PIN: (Name 1)<br><br>_____<br>(4 numeric digits)<br>*Please remember you PIN- For security reasons we will not mail it to you. | Select Your PIN: (Name 2)<br><br>_____<br>(4 numeric digits)<br>*Please remember you PIN- For security reasons we will not mail it to you. |
|--|--|

**Online Banking**

Account Access.....(To register go to 5staronlinebanking.com)  
**Email Address** \_\_\_\_\_

**SIGNATURES** – By signing this application, I hereby authorize 5Star to open my account. If I choose the Overdraft Protection feature, I agree to allow 5Star Bank to make whatever credit inquiries it deems necessary in connection with this application. **Important: Please include a copy of a government issued photo ID (Example- Driver's license, Military ID, Passport) and a copy of a utility or telephone bill, which shows your name and current address. Mail Application to: 5Star Bank, PO Box 14108, Colorado Springs, CO 80914.**

X \_\_\_\_\_ X \_\_\_\_\_  
Applicant's Signature                      Date                      Co-Applicant's Signature                      Date