PERSONAL BANKING APPLICATION



☐ Individual Account ☐ Joint Account	
PRIMARY ACCOUNT HOLDER'S FULL LEGAL NAME (as	appears on identification)
PHYSICAL ADDRESS	CITY, STATE ZIP
MAILING ADDRESS	CITY, STATE ZIP
SOCIAL SECURITY NUMBER	DATE OF BIRTH
HOME PHONE NUMBER	WORK PHONE NUMBER
MOBILE PHONE NUMBER	EMAIL ADDRESS
VALID/CURRENT DRIVER'S LICENSE NUMBER	ISSUE DATE
STATE OF ISSUANCE	EXPIRATION DATE
EMPLOYER	OCCUPATION
Primary Banking Location: North Myrtle Beach Towne Centre/Carolina Forest Mt. Pleasant Charleston Beaufort Bluffto	Myrtle Beach Murrells Inlet Pawleys Island Georgetown on HHI (Park Lane) HHI (Main Street)
JOINT ACCOUNT HOLDER (if applicable)	JOINT MAILING ADDRESS (if applicable)
JOINT SOCIAL SECURITY NUMBER (if applicable)	JOINT DATE OF BIRTH (if applicable)
JOINT PHONE NUMBER (if applicable)	JOINT EMAIL ADDRESS (if applicable)
JOINT DRIVER'S LICENSE NUMBER (if applicable)	JOINT ISSUE DATE (if applicable)
JOINT STATE OF ISSUANCE (if applicable)	JOINT EXPIRATION DATE (if applicable)
JOINT EMPLOYER (if applicable)	JOINT OCCUPATION (if applicable)
Additional Service Requested:	
Online BankingElectronic StatementsDebit Card	I understand that South Atlantic Bank will review my credit history and obtain reports from consumer agencies in order to qualify for a deposit account.

MEMBER CHARGE FOR