



SECURITY STATE BANK

Aitkin · Garrison · Grand Marais

DEBIT / ATM CARD APPLICATION

To apply for a Security State Bank of Aitkin **MasterCard** Debit Card you must have a Security State Bank checking account and/or savings account. Each applicant must complete a separate application. All purchases made with the MasterCard Debit Card will be deducted from your primary checking account.

Cardholder Name: _____

SSN/EIN#: _____ Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Business Phone: _____

Cell Phone: _____ Employer: _____

Mother's Maiden Name: _____ Date of Birth: _____

Email Address: _____

Do you currently have a Security State Bank MasterCard Debit Card?

I wish to access this account for Debit Card purchases and ATM use: Yes No

Primary Checking Account # _____

Savings Account (Optional)# _____

By signing below, I am applying for a Security State Bank of Aitkin MasterCard 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 Security State Bank of Aitkin checking account. I authorize Security State Bank of Aitkin to verify the information provided above and to request a credit report if necessary. The Security State Bank of Aitkin Debit Card is available for qualified customers only. I agree to be bound by the terms and conditions covered in the MasterCard Disclosure Statement and Cardholder Agreement.

Applicant's Signature

X _____ Date: _____

FOR BANK USE ONLY

Card # (do not print the full acct.#):

Date Approved:

Approved By:

Date Ordered:

By:
ID Type:

Verified:
ID #:

If address changed within 30 days of Application Date, customer identity must be verified in person and photo identification documented.

MasterCard Disclosure Statement & Cardholder Agreement

1. Security State Bank of Aitkin may refuse any request to issue a MasterCard 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, shortly after your receipt of the MasterCard debit card, you will receive a Personal Identification Number (PIN) that is automatically assigned. You agree that you will not share this PIN with anyone other than a joint owner on your account. You agree that you will not record the PIN on the card itself.
4. Authorization – You authorize us to charge your designated account(s) for purchases, and ATM withdrawals disbursed and to credit your designated account(s) for refund returns and deposits received in connection with transfers involving use of the Debit 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 Security State Bank of Aitkin. You agree to return the card to us immediately upon our demand. Security State Bank of Aitkin can revoke or terminate your card without cause or notice. You may not authorize others to use the card(s).
6. Card Restrictions – On MasterCard Debit Cards, Point of Sale (POS) transactions are limited to \$1,000.00 per calendar day. Cash withdrawals from ATMs are limited to \$500.00 per calendar day. You understand that the Bank may establish different limits for a cardholder, but never to exceed these stated amounts unless you have applied for a provisional limit increase.
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 of your designated accounts be closed, your card privileges will be cancelled and we may retain your card if you attempt to use it.
8. Replacement of Lost or Stolen Cards – If your card is lost or stolen, and you request that we reissue a replacement card to you, you agree to pay a replacement fee for such replacement card, and you agree that we may debit your account for this fee. See our Fee Schedule for any related fees.
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 for security reasons, 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. Except as otherwise provided in this agreement, or by applicable law, notices from you to us must be in writing and will be effective when received by us.
11. Collection Expenses – If we must pursue legal means to collect amounts you owe us 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 any and all rights under this Cardholder Agreement individually, and shall be jointly and severally liable for the obligations incurred by any such exercise. Each account holder may use the card(s), may agree to any amendment to or termination of the agreement, and may close any designated account. Each account holder agrees that any action taken by one account holder will be binding upon each account holder.
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, you may request a copy from us.
14. Governing Law – The terms and conditions set forth in this agreement will be governed by the laws of the United States of America and of the State of Minnesota. In the event of any conflict between these terms and conditions and any applicable federal or state law or regulation, these terms and conditions shall be considered modified to comply with such law or regulation.