



Mobile Deposit Application

ELIGIBILITY REQUIREMENTS

- No returned checks in the past 6 months
- Current Apple or Android user
- Account in good standing with The Bank of Tescott
- User of On-line Banking

First Name _____

Last Name _____

Address _____

City _____

State _____

Zip _____

Cell Phone _____

Email Address _____

Deposit/Check limit of \$1,500.00 which can be increased with preapproval.

I understand that The Bank of Tescott will retain this application for approval, and that if I do not meet the criteria listed above, my application for Mobile Deposit may be disapproved. I acknowledge that if in the future, I no longer meet the eligibility requirements; my access to Mobile Deposit may be revoked. By signing below I acknowledge that I have received the Mobile Deposit/Remote Capture Agreement as well as accept the terms and authorize The Bank of Tescott to check my credit and banking history.

APPLICANT SIGNATURE

DATE

SSN _____

| For Financial Institution Use Only | |
|------------------------------------|----------------------|
| Approval _____ | Date Activated _____ |
| Support Agent _____ | Officer _____ |
| Special Notes _____ | |
| Special Limits | |
| Per Item/Deposit _____ | |
| Daily Total _____ | |