

# SCB Internet Banking Enrollment Form

**This enrollment form is for Sevier County Bank Customers with existing accounts.**

Please complete this form to enroll in SCBanking Online. After completion, please return this signed form to us at any of our six convenient locations, by postal mail or fax to 865-774-4760. Your Login ID and Password (PIN) will be sent to you according to your instructions. For further assistance, call the Electronic Banking Dept. at 865-453-6101 or email [home@SevierCountyBank.com](mailto:home@SevierCountyBank.com).

## Customer Information

<b>Customer/ Company Name:</b>			<b>Date:</b>
<b>Address:</b>			<b>TN/SSN:</b>
<b>City:</b>	<b>State:</b>	<b>Zip:</b>	<b>Phone:</b>
<b>Primary Contact for Account(s):</b>			
<b>Email Address:</b>			

## Requested Services (Please Check All That Apply)

<input type="checkbox"/> <b>Basic Internet Banking</b> <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <div style="text-align: center;"><i>Free</i> <input type="checkbox"/> <b>Account Access / View History</b></div> <div style="text-align: center;"><i>Free</i> <input type="checkbox"/> <b>Account Transfers</b></div> <div style="text-align: center;"><i>Free</i> <input type="checkbox"/> <b>Bill Pay*</b></div> </div>			<input type="checkbox"/> <b>Cash Management**</b> <input type="checkbox"/> <b>ACH**</b> <input type="checkbox"/> <b>Wire Transfers**</b>	
<p><b>*Corporations are not eligible for Bill Pay:</b> In utilizing Bill Pay, you are authorizing ACH to debit or checks to be taken out of your checking account. Fee Waiver restrictions apply. If you pay at least one bill per month.</p>			<p><b>** Fees Apply:</b> Requires additional signed agreements. A representative will contact you for a consultation on setup and training.</p>	

## User Information

### List all persons who will have access to your User ID and Password for services in Basic Internet Banking

If you give your password to anyone or fail to safeguard its secrecy, you do so at your own risk. You are liable for all transactions made or authorized using your password. Separate User ID's and Passwords are used for each user only if you request Cash Management Services.

<b>User 1</b>		<b>Title:</b>	
<b>User 1 Email</b>			
<b>User 2</b>		<b>Title:</b>	
<b>User 2 Email</b>			
<b>User 3</b>		<b>Title:</b>	
<b>User 3 Email</b>			
<b>User 4</b>		<b>Title:</b>	
<b>User 4 Email</b>			

## Account Information

	Account #	E-Statement	Account Type*		Account #	E-Statement	Account Type*
1		<input type="checkbox"/>		4		<input type="checkbox"/>	
2		<input type="checkbox"/>		5		<input type="checkbox"/>	
3		<input type="checkbox"/>		6		<input type="checkbox"/>	

\*Account Type: CH=Checking CD=Certificate of Deposit SA=Savings LN=Loan

**\*Once enrolled in SCBanking Online, customers can sign up to receive E-statements through your online account.**

## Signatures

I have read the Internet Banking Agreement and Disclosure and the terms are acceptable. I instruct Sevier County Bank to issue a Login ID and Password on by behalf for the users indicated above. If any transaction does not have an adequate balance(s) to meet the transaction amount, I acknowledge that the Bank is not obligated to complete the transaction as ordered. I understand that the Bank may, at its sole discretion, request additional documentation to complete this enrollment process.

By signing this form, I hereby agree to indemnify and hold harmless Sevier County Bank from any and all liability and agree not to make any claim against Sevier County Bank or bring and action against Sevier County Bank relating to its honoring or allowing any actions or transactions under my password.

<b>Account Holder ⇒ Signature</b>	
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### For Internal Use Only – Employee must sign before forwarding to Internet Banking Department

<b>Branch:</b>	<b>Officer:</b>	<b>Date:</b>	<b>Internet Banking Department Section E-banking ID:</b>
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