

THE BANK OF TESCOTT

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**

LAST NAME	FIRST NAME	MIDDLE INITIAL	
ADDRESS	CITY	STATE	ZIP CODE
CELL PHONE	HOME PHONE	EMAIL ADDRESS	

No charges. 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

For Financial Institution Use Only		CIRCLE ONE:
RESEARCHER: _____	OFFICER: _____	APPROVED DENIED
DATE REVIEWED: _____	DATE ACTIVATED: _____	SPECIAL NOTES:
PRIMARY PORT#: _____		_____
STANDARD LIMITS:	SPECIAL LIMITS:	
PER ITEM/DEPOSIT: _____	PER ITEM/DEPOSIT: _____	
DAILY TOTAL: _____	DAILY TOTAL: _____	