

Owners & Authorized Signers

The list of people below are hereby authorized to conduct transactions, without restrictions, with the bank once the account has been opened. Only one (1) signer is required for any transaction and the use of facsimile signatures may not be used without prior approval by the bank. Convenience signers must use the last two lines and ✓ the area by the X.

X _____
Printed Name: _____

X _____
Printed Name: _____

X _____
Printed Name: _____

X () _____
Printed Name: _____

X () _____
Printed Name: _____

(Convenience Account signers indicated by a ✓ by the X)

If checked, List of POD or Trust Beneficiaries

The people below are the Payable on Death beneficiaries or trustees on this account. If multiple names, proceeds are deemed to be equally distributed with right of survivorship.

Beneficiary Name 1: _____

Beneficiary Name 2: _____

Beneficiary Name 3: _____

Beneficiary Name 4: _____

BACKUP WITHHOLDING CERTIFICATION

TIN or SSN: _____

TAXPAYER ID NUMBER - The Taxpayer Identification Number shown above is my correct taxpayer identification number

BACKUP WITHHOLDING - I am not subject to back withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends or the Internal Revenue Service has notified me that I am no longer subject to backup withholdings.

EXEMPT RECIPIENT - I am an exempt recipient under the Internal Revenue Service Regulations.

SIGNATURE - I certify under penalties of perjury the statement checked in this section are correct and that I am a U.S. person (including a U.S. resident alien).

X _____

Account Title Above _____

Account Number: _____

Date Completed: _____

Initial Deposit: \$ _____

Funded by: Check Cash Other: _____

Ownership of Account Designation

Select one by checking the box and initialing the acknowledgment at the bottom of this box. Certain choices may determine how property passes on your death. Your will may not control the disposition of funds for some of these accounts.

- Single Party-no POD Single Party-with POD
- Multi Party-no Survivorship Multi Party-w/survivorship
- Multi Party- with survivorship & POD
- Trust Account with beneficiaries listed
- Trust Account with separate agreement dated: _____
- Convenience Account (signers indicated by ✓ by name)
- Other: _____

Customer Acknowledgement: _____

Acknowledgement of Terms

The parties signing to the left understand that an account agreement and disclosure statements with a complete description of our rights, responsibilities and fees will be sent (by mail or electronically) as soon as possible if not provided at the time this form is signed. The signer(s) further authorize the bank to verify eligibility for the account(s) by means of credit reports, financial references, employment history/status, or other reasonable investigative tools customarily used in the banking industry. This does include verification against any OFAC or other government listing.

If applicable, the following disclosures were provided at the time of this application.

- Truth-in-Savings Funds Availability EFT
- Substitute Checks Deposit Account Terms
- Privacy Internet Services ODP Service
- e-Statements/e-Notices CheckMate Line

By initialing below, I understand that the information contained on this application will be used in conjunction with the bank's products and services that I request now and in the future. I certify that the information is true and correct to the best of my belief.

The account will officially be deemed open at the time the account is accepted and posted on the bank's system. If we determine that your account cannot be opened, we will return any funds promptly.

—Acknowledgement Initials—

Customer Initials _____ Bank Staff Initials: _____

Unlimited checking with simple and easy options to add what you need or want. We put you in control to add special features, including interest. You just choose what you would like and we will turn up the power!

PowerBANKING Standard Benefits include:

- Unlimited checking with NO minimum balances or transaction fees.
- Free Visa Debit Card(s) for signers.
- End-of-month truncated and/or e-Statements.
- Free secure Internet Banking account access with balance information, transaction details, check images, transfers, customized alerts by phone, email or messages, e-Statements and e-Notices delivery & archival.
- Free CheckFree bill-pay via our Internet service.
- Combined statements for other CD, IRA or loan accounts tied to your checking account.
- Free automatic transfers from other Horizon accounts for overdraft protection or monthly savings plans.
- Free External Exchange transfers to allow you to move funds between your accounts at other institutions using our Internet Banking service.

PowerBANKING COST: TOTALLY FREE

PowerTOOLS Benefits, Features & Options:

By choosing this option, you get all these for free unless you do not meet the minimum balance requirements. Select the features you like!

- Automatic refund of ATM surcharges by other institutions.
- Free starter checks to get you going.
- Up to 5 free Cashier's Checks per month.
- 1st year's rent free on safe deposit box.
- Mailed end-of-month Image statements

Overdraft Protection (Optional/Qualifications)

- Overdraft Privilege Service (discretionary)
- CheckMate Overdraft Protection Service

Interest Options (Pick One)*

- No Interest on the account (\$1,000.00 minimum balance to avoid fee)
- NOW or Money Market Interest earned (\$1,500.00 minimum balance to avoid fee)

PowerTOOLS: \$7.00 or FREE*

*(IF MAINTAIN \$1,000 OR \$1,500 MINIMUM BALANCE)

Ask for our PowerBANKING Brochure for additional details and explanations of all the options.

Member FDIC

December 2008

PowerBANKING

Account Application & Signature Card

HORIZON BANK



Personal Checking

Account Application & Services Selection

An asterisk (*) preceding any item means this information is normally required before we can open the account

Account # _____
(Assigned by Bank)

Primary Owner Information

*Legal Name (Last, First, Middle) _____

*Residential Address (Physical Address) _____
 Second Line (if needed) _____ *City: _____ *St: _____ *Zip _____

Mailing Address (if different) _____
 Second Line (if needed) _____ City: _____ St: _____ Zip _____

Previous Address (if less than 2 yrs at current) _____
 Second Line (if needed) _____ City: _____ *St: _____ Zip _____

Home Phone[]: _(_)_ _____ Cell Phone[]: _(_)_ _____

Work Phone[]: _(_)_ _____ Fax Number: _(_)_ _____
Place a check mark [X] by the phone number that you can normally be reached during banking hours

Email Address: _____

*Date of Birth ___/___/_____ City & State of birth: _____

*U.S. Citizen? Yes: _____ No: _____ Other: _____ (if other, name Country) _____

*Tax ID Number(SSN): _____ Type, if not SSN: _____

*Picture ID: Type: _____ Issued by: _____ Number: _____ Expires: _____
 (DL, ID, Passport, Visa) (State or Agency)

Current Employer: _____ Phone: _____

Type of business or profession: _____

Prior Banking Relationship: _____
 Institution Name _____ City/State _____

Nearest Relative not living with you:
 Name: _____ Relationship: _____

Address: _____ City/St: _____ Phone: _____

Referred by: _____ Mother's Maiden Name: _____

Additional Signer

*Legal Name (Last, First, Middle) _____

*If Different, Residential Address (Physical Address) _____
 Second Line (if needed) _____ *City: _____ *St: _____ *Zip _____

Email Address: _____ Phone: _(_)_ _____

*Date of Birth ___/___/_____ City & State of birth: _____

*U.S. Citizen? Yes: _____ No: _____ Other: _____ (if other, name Country) _____

*Tax ID Number(SSN): _____ Type, if not SSN: _____

Picture ID: Type: _____ Issued by: _____ Number: _____ Expires: _____
 (DL, ID, Passport, Visa) (State or Agency)

*Ownership Status: Co-Owner: _____ Convenience Signer: _____ Relationship: _____

Security Questions and Answers (optional)

Answer as many of these as you like. We can add any or all of them to our system for our staff's use during telephone inquiries or in-person service or transactions.

What is your mother's maiden name? _____

Desire to designate a PIN or Secret Phrase? _____

Where do you consider your birthplace? _____

When did you graduate from High School? _____

Internet ID Requested

Required for bill-pay, e-Statements & e-Notices

1st Choice: _____

2nd Choice: _____

Debit Cards Requested

1st Card: _____

2nd Card: _____

PowerBANKING Service Options

Select the services or options you would like on your account.

- PowerBANKING Standard Features**
- Internet IDs (required for bill-pay, e-Statements & e-Notices)
 - Visa Debit Cards (write names for cards in box on right)
 - CheckFree Bill-Pay (requires Internet ID in box on right)
- PowerTOOLS Options (Pick any of these features you like!)**
- ATM surcharge refunds
 - Free Starter Checks
 - End-of-month image statement
 - Free Safe Deposit Box
- Overdraft Protection Options (Pick only one, default is none)**
- None
 - OD Privilege
 - CheckMate Credit Line
- Interest Options (Pick only one, default is none)**
- None
 - NOW Interest Rates
 - Money Market Rates

—This Box for the Bank's use only—

Must Obtain at least one Primary and one Secondary ID (Mark which items used for verification and request copy of each, except credit cards.)			
↓ Primary Forms of ID		↓ Secondary Forms of ID	
<input type="checkbox"/>	Texas Drivers License	<input type="checkbox"/>	Social Security Card
<input type="checkbox"/>	Texas Identification Card	<input type="checkbox"/>	Employer ID or Insurance Card
<input type="checkbox"/>	Government or Military ID Card	<input type="checkbox"/>	Student ID Card
<input type="checkbox"/>	Passport (Country _____, ID Number _____)	<input type="checkbox"/>	Major Credit Card (Type _____, Exp Dte: Last 4# _____)
<input type="checkbox"/>	Alien Registration Card	<input type="checkbox"/>	Utility Bill with current address
<input type="checkbox"/>	Permanent Resident Alien Card	<input type="checkbox"/>	Tax or Assessment Bill
<input type="checkbox"/>	Out-of-state DL (_____)	<input type="checkbox"/>	Other: _____