

**FIRST STATE BANK VISA  
CHECK CARD APPLICATION**

**I request the First State Bank Visa Check Card. You are authorized to check my credit.  
All applications are subject to our approval.**

\_\_\_\_\_  
**Applicant Name**

\_\_\_\_\_  
**Check Card Number**

\_\_\_\_\_  
**Applicant Social Security Number**

\_\_\_\_\_  
**Mailing Address**

\_\_\_\_\_  
**City**

**State**

**Zip Code**

\_\_\_\_\_  
**Daytime Phone**

\_\_\_\_\_  
**Evening Phone**

\_\_\_\_\_  
**Co-Applicant Name**

\_\_\_\_\_  
**Check Card Number**

\_\_\_\_\_  
**Co-Applicant Social Security Number**

\_\_\_\_\_  
**Daytime Phone**

\_\_\_\_\_  
**Evening Phone**

\_\_\_\_\_  
**Checking Account Number**

\_\_\_\_\_  
**Applicant Signature**

**Date**

\_\_\_\_\_  
**Co-Applicant Signature**

**Date**