RENASANT BANK PAYROLL CARD APPLICATION

(return to employer)

Employer Name:	

USA PATRIOT ACT NOTICE: Federal law requires us to obtain, verify, and record information that identifies each person who opens an account, in order to help the government fight the funding of terrorism and money laundering activities. To process this application, we must have your name, street address, date of birth, and other identifying information, and we may ask for identifying documents from you as well.

EMPLOYEE INFORMATION: Employee to Complete (Ple	ease Print)			
Employee Name:				
Employee Residential Address:				
City:	State:	Zip:		
Mailing Address (if different from above):				
City:	State:	Zip:		
Employee Tax ID# (Social Security#):	Date of Birth:	Telephone:		
Employer:	Position:Date:	Started (mo/yr):		
Are you a United States Citizen? ☐ Yes ☐ No				
If no, what is your immigration status? □ Permanent Resident Alien □ Temporary Resident Alien	□ Non-Resident Alien □ Di	plomatic Status		
Do you hold citizenship in any other countries or jurisdictions If yes, what countries?		Io		
Do you or any member of your immediate family hold any for	eign government offices? Ye	es 🗆 No		
Terms and Disclosure and Privacy Notice: I agree to the partners and Disclosures (the "TERM AND DISCLOSURES")				
Employee Application: I am requesting a Renasant Bank Payroll Card Account (the "Account"). I have answered the above questions fully, accurately and truthfully. If my application is approved, I understand that my payroll card will be mailed to me, and that in certain instances I may be provided a temporary ATM card until I receive my regular card. I promise not to use either card until I have read and agreed to the TERMS AND DISCLOSURES. I understand that the card is a stored value card and that I cannot write checks on this Account. Withdrawals are to be made by using my payroll card. The account is designed for payroll direct deposits. Deposits at an ATM will not be permitted. I authorize you to obtain information by checking my credit records and statements made in this application, and to inform my employer whether or not the card is issued. If this application is denied, you will provide a written explanation for the reason for the denial.				
Direct Deposit Authorization: I authorize my employer to directly deposit my periodic salary/compensation payments, net of required withholdings, or other required withholdings or authorized deductions (a "Payroll Payment") into my Account at Renasant Bank ("Renasant") and to initiate (if necessary) debit entries and adjustments for any credit entries in error to my Account. This authority will remain in effect until I have filed a new authorization, or until revoked by me in writing, or upon termination of my employment with my employer.				
I understand that the following Tax certification applies to my account: Under penalties of perjury, I certify that (1) the number shown on this form is my correct taxpayer identification number (or I am waiting for the number to be issued to me), and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of failure to report all interest and dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding. You must cross out item (2) above if you have been notified by the IRS that you are currently subject to backup withholding because of underreporting interest or dividends on your tax returns. The IRS does not require your consent to any provisions of this document other than the certification requested to avoid backup withholding. I further certify that I am a U.S. person (including a U.S. resident alien).				
By signing this application: I hereby authorize my employer to request Renasant to issue a card to me. I agree that my activating or using my card (including my temporary ATM card) shall constitute my agreement to: (1) the TERMS AND DISCLOSURES that accompany my card, and (2) changes to, or replacement for, those TERMS AND DISCLOSURES that may be sent or made available to me from time to time. I also authorize Renasant to debit my Account, without notifying me, for the fees described in the fee schedule that accompany those TERMS AND DISCLOSURES, or as such fees may change from time to time. Renasant may change those fees at any time.				
Employee Signature:	Date:			
\square I (employer have verified that the employee information position Initials	provided above is accurate, to the	best of my knowledge.		
Employer Name:	Employer Signature:			