

PEOPLES BANK

People you know. People you trust.

of WISCONSIN

Please call (800) 575-8528 for more information.

GREEN ADVANTAGE - ATM/DEBIT CARD APPLICATION

Date: _____ I would like to apply for a/an: ATM Card Debit Card

How many cards? _____

Account #1: _____ Account #2: _____

Applicant #1

Name: _____
Address: _____
City, State, Zip: _____
Mother's Maiden Name: _____
Home Phone #: _____
Date of Birth: _____
Soc. Sec. #: _____
Work Phone #: _____
Employer: _____

Applicant #2

Name: _____
Address: _____
City, State, Zip: _____
Mother's Maiden Name: _____
Home Phone #: _____
Date of Birth: _____
Soc. Sec. #: _____
Work Phone #: _____
Employer: _____

Signatures: By signing below, the undersigned request(s) the described services and agrees to the terms and conditions governing the services, including any fees and charges. The undersigned agree(s) that all information is accurate and authorizes the financial institution to verify credit and employment history by any necessary means, including preparation of a credit report by a credit agency.

Signature x _____ Signature x _____

=====

BANK USE:

Date Received: _____ Approved: Yes / No

___ CFM #3 ___ CFM #37 ___ DDM2#21

Processed By: _____

STAY PROTECTED – opt in for overdraft privileges

Debit and ATM cards are a convenience hard to imagine living without. Using debit and ATM cards make it easier than ever

to make purchases and payments, but it also makes it easier to overdraw a checking account and incur fees associated with overdraft protection services. As a result, federal lawmakers have created new rules governing overdraft protection programs that go into effect on July 1, 2010.

You now have the option concerning whether you want to continue to have our overdraft service cover your ATM and everyday debit card transactions. Please take note that this opt-in rule applies only to ATM and everyday debit card transactions and does not pertain to overdraft protection services associated with written checks or recurring debit transactions, such as regularly scheduled bill payments.



Why opt in? Peoples Bank of Wisconsin's Maximum Account Protection (MAP) courtesy overdraft program is designed with your protection and convenience in mind. The vast majority of our customers do not overdraw their accounts and incur fees, however life doesn't always go according to plan and overdrafts do occur. Without overdraft protection, your ATM and everyday debit card transactions may be declined if you attempt to make a transaction without sufficient funds.



For existing account holders: Unless you opt in, beginning August 13, 2010, your ATM and everyday debit card transactions will NOT be protected under Peoples Bank of Wisconsin's MAP courtesy overdraft protection program.

For new account holders: If you open a new account on or after July 1, 2010, your ATM and everyday debit card transactions will not be protected under Peoples Bank of Wisconsin's MAP courtesy overdraft protection program unless you opt in.

How to opt in: Call 1-800-575-8528, visit peoplesbankofwi.com or complete the opt-in form on the reverse side. You can drop it off at either of our locations, fax it to 715-634-8027 or return it by mail in the enclosed postage paid envelope.

See reverse for more
information and opt-in form

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What You Need to Know about Overdrafts and Overdraft Fees

An overdraft occurs when you do not have enough money in your account to cover a transaction, but we pay it anyway. We can cover your overdrafts in two different ways:

1. We have standard overdraft practices that come with your account.
2. We also offer overdraft protection plans, such as a link to a secondary checking, savings or money market account, which may be less expensive than our standard overdraft practices. To learn more, ask us about these plans.

This notice explains our standard overdraft practices:

What are the standard overdraft practices that come with my account?

We do authorize and pay overdrafts for the following types of transactions:

- Checks and other transactions made using your checking account number
- Recurring debit transactions, such as monthly automatic bill payments*.

We do not authorize and pay overdrafts for the following transactions unless you ask us to:**

- ATM transactions
- Everyday debit card transactions

With our standard overdraft practices:

We pay overdrafts at our discretion, which means we do not guarantee that we will always authorize and pay any type of transaction.

Without our standard overdraft practices:

If we do not authorize and pay an overdraft, your transaction will be declined.

What fees will I be charged if Peoples Bank of Wisconsin pays my overdraft?

Under our standard overdraft practices:

We will charge you a fee of up to \$35 each time we pay an overdraft, with a limit of 5 charges per day.

What if I want Peoples Bank of Wisconsin to authorize and pay overdrafts on my ATM and everyday debit card transactions?

If you want us to authorize and pay overdrafts on ATM and everyday debit card transactions, call 1-800-575-8528, visit peoplesbankofwi.com, or complete the form below and return it by mail in the postage paid envelope.

*Company or organization processing recurring debit transaction must have the transactions coded as recurring.

**Effective July 1, 2010 for new account holders and August 13, 2010, for existing Peoples Bank of Wisconsin account holders.

For Consumer Deposit Accounts Only

OPT-IN FORM

Effective July 1, 2010

I WANT Peoples Bank of Wisconsin to authorize and pay overdrafts on my ATM and everyday debit card transactions.

I DO NOT WANT Peoples Bank of Wisconsin to authorize and pay overdrafts on my ATM and everyday debit card transactions.

Please contact Peoples Bank of Wisconsin at 1-800-575-8528 or visit either of our locations as we are happy to answer any questions you may have.

If this form is NOT returned, we must assume that you DO NOT WANT Overdraft Protection to cover your ATM and everyday debit card transactions. This service will then be removed effective August 13, 2010.

Printed Name _____

Account Number (one account per form, please photocopy for additional accounts) _____

Signature _____

Date _____

FOR INTERNAL USE ONLY

DATE RECEIVED DATE PROCESSED INITIALS

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peoplesbankofwi.com

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