



**FIRST COMMUNITY BANK**  
of Bedford County

**ONLINE BANKING AND BILL PAYMENT APPLICATION**

All accounts in which you are listed as an owner are accessible through First Community Bank's Online Banking. We will not pass any account numbers over the internet, nor will any of our employees ask you for your account numbers over the internet.

Please print this form and bring into any one of our offices OR mail to: **First Community Bank  
PO Box 1027  
Shelbyville, TN 37162  
Attention: Internet Banking**

Email Address: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

**Please sign me up for the following services:**

Account Access

Please give me access to and the ability to transfer funds between ONLY the following listed accounts on which I am an owner.

	<i>Account Type (select one)</i>				
Account Number: _____	<input type="checkbox"/> CHK	<input type="checkbox"/> SAV	<input type="checkbox"/> LON	<input type="checkbox"/> CD	
Account Number: _____	<input type="checkbox"/> CHK	<input type="checkbox"/> SAV	<input type="checkbox"/> LON	<input type="checkbox"/> CD	
Account Number: _____	<input type="checkbox"/> CHK	<input type="checkbox"/> SAV	<input type="checkbox"/> LON	<input type="checkbox"/> CD	
Account Number: _____	<input type="checkbox"/> CHK	<input type="checkbox"/> SAV	<input type="checkbox"/> LON	<input type="checkbox"/> CD	

Free Bill Payment

I understand the information in this form is only general information. I will read the full First Community Bank Online Banking Agreement. By using Online Banking through First Community Bank Online Banking Agreement and such other terms and conditions or amendments thereto, as may be established by First Community Bank and communicated to me. I hereby authorize First Community Bank to verify any information included in this application and allow access to all the accounts listed above on which I am an owner.

By signing below, I hereby agree to the above stated conditions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To speak with a Online Banking representative,  
contact Support at **931-684-5800** or **fcb@first-community.net**