

USA PATRIOT ACT – Identity Verification

HSA Bank respects and protects the confidentiality of customer information. We only request information that is necessary to open and service your account. Some of the information we request is required by the USA PATRIOT Act, (a federal law) and the regulations adopted by governmental agencies to implement it. This law requires us to obtain, verify, and record information that identifies each person or entity that wishes to open an account. This information helps the government fight funding of terrorism and money laundering activities.

When you open your HSA, we request your name, address, date of birth and social security number on the application. This information allows us to verify your identity. HSA Bank verifies identities through Experian, a credit reporting service. The verification of your identity does not include information related to your credit history. If the information provided on the application does not match the information in the Experian database, HSA Bank will make up to three (3) attempts to obtain the additional forms of identification. You will be asked to supply readable and complete copies of two (2) of the following forms of identification:

- Current Valid Driver's License
- Current Valid Passport
- Current Valid Driver's License from other country
- Most recent Property Tax Bill
- Most recent Utility Bill (showing your name and address)
- Current Valid Major Credit Card
- Current Valid Major Credit Card Statement
- Two most recent Pay Stubs (counts as one form)
- Current Valid Employee ID card with photo and signature
- Current Valid State Non-Driver Identification Card
- Current Valid State Public Assistance card
- Current Valid College or High School ID card with photo and signature
- Current Valid Senior Citizen ID card issued by town of residence with photo and signature
- W-2 Tax form
- Current Lease

Additionally, you will be required to complete the following:

Please fill in all requested information:

Last Name: _____ (Maiden Name if applicable) _____

First Name: _____ Middle Initial: _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Social Security Number: _____ Date of Birth: _____

I certify that the information provided above and attached hereto is accurate and request that any information provided previously be updated with the information here.

Signature: _____ Date: _____

If your employer is facilitating your enrollment, you may need to authorize your employer to provide us with a copy of your "Employment Eligibility Verification Form I-9". If your identity can not be authenticated, your account will be opened in a frozen status. This means we will restrict access to your account until we can verify your identity.