

ZIONS SECURITIES CORP.

ACCESS CARD APPLICATION

ZIONS SECURITIES CORPORATION
10 EAST SOUTH TEMPLE, SUITE 1500
SALT LAKE CITY, UTAH 84133

CARD #: _____
EFF. DATE: _____
LEVELS: _____

CARDHOLDER: *(Please Print)*

Name: _____
Address: _____
Phone: _____
Social Security No: _____

FIRM: *(Please print)*

Name: _____
Address: _____
Phone: _____

FEE: \$10.00/Per Card

Bill Tenant: _____
Paid by Check: _____

I agree to use this card only for the purpose issued and to abide by any rules or regulations currently set forth, or which may in the future be modified, governing the use of this card.

INDIVIDUAL SIGNATURE: _____
FIRM'S AUTHORIZING AGENT: _____
ZSC PROPERTY MANAGER: _____

INTERNAL USE ONLY

ACTIVATED _____

COMP. UPDATE _____

AR SENT _____