



**GIANTBANK.COM OVERDRAFT PROTECTION  
LINE OF CREDIT APPLICATION**

(existing giantbank.com Personal Banking customers only)

To apply for an Overdraft Protection Line of Credit, please provide the information requested below. Print the completed application, sign it and return it to the address shown at the end of the application.

**Your giantbank.com Checking Account Number:**

**Account Title**

**OVERDRAFT PROTECTION:**

Would you like to apply for Overdraft Protection?       Yes       No

**AUTHORIZATION**

I hereby apply for an Overdraft Protection Line of Credit to be used in conjunction with the account listed above. I agree to the terms and conditions contained in the [Overdraft Protection Agreement and Disclosure](#) that have been provided to me. I authorize giantbank.com to make any investigation of my credit, either directly or through any agency. I understand that giantbank.com will retain this application and any other credit information, even if this Overdraft Protection Line of Credit is not granted.

**Account Holder/Applicant:**

\_\_\_\_\_  
Authorized Signer (please print)

\_\_\_\_\_  
Authorized Signer (please print)

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Authorized Signature

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

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

Please return the completed application to:

**giantbank.com**  
**a Division of Landmark Bank, N.A.**  
**P.O. Box 100970**  
**Fort Lauderdale, Florida 33310-1970**

**Or Fax to: (954) 958-0190**