

Signature of Authorized Signer

Date

S. Contingent Beneficiary		051			Health Savings Account Application
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Type of Health Insurance Plan   Self-Only   Family   Driver's License Expiration Date	Driver's License #	/ State of			
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Specific Only   Self-Only   Family   Employer	Driver's License #	/ State of			
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Signature of HSA Owner Date Signature of Custodian/Trustee Date	XSignature of HSA Ow	ner	 Date	X	Date

BACKUP WITHHOLDING CERTIFIC	CATIONS HSA Acc	count Number:
SSN:	_	
X TAXPAYER I.D. NUMBER– The Taxpayer Identification above (TIN) is my correct taxpayer identification numbers.		
X BACKUP WITHHOLDING—I am not subject to back because I have not been notified that I am subject to be result of a failure to report all interest or dividends, or to Service has notified me that I am no longer subject to	backup withholding as a he Internal Revenue	
□ EXEMPT RECIPIENTS—I am an exempt recipient to Revenue Service Regulations.	under the Internal	
l x		
Signature Sign Here	Date	
(Above Signature also authorizes Check, Debit Card, Applicable).	Online Banking is	
Applicable).		
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elect Services: ]Visa® Check Card for Owner ]Visa® Check Card for Authorized Signer	Completed by AE	Needs to be completed by Dep OPs
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## ADDITIONAL INFORMATION

**Purpose.** The Health Savings Account Application form is designed to assist you in opening a Health Savings Account (HSA). This Application will accompany an Internal Revenue Service (IRS) Form 5305-B, *Health Savings Trust Account*, IRS Form 5305-C, *Health Savings Custodial Account*, or IRS-approved prototype and Disclosure Statement.

## **Definitions**

**HSA-** An HSA is a tax-exempt trust or custodial account established exclusively for the purpose of paying qualified medical expenses of you, your spouse, and your dependents.

Account Owner- The account owner is the person who establishes the custodial account. For HSA purposes, the account owner is you.

## **Additional Documents**

Applicable law or policies of the HSA custodian may require additional documentation such as IRS Form W-9, Request for Taxpayer Identification Number and Certification.

## For Additional Guidance

It is in your best interest to seek the guidance of a tax or legal professional before completing this document. For more information, refer to IRC Section 223 and all additional IRS guidance, IRS publications that include information about HSAs, instructions to your federal income tax return, your local IRS office, or the IRS's web site at www.irs.gov.