




Application | Bank of America Advantage SafeBalance Banking® Your Application

Your Information

1

 CALL
844-375-7031

Your Information

Welcome. Apply in just minutes.

Personal

* required

First name *

Middle name

Last name *

Suffix

Address line 1 *
No P.O. boxes

Address line 2
Apartment #, Unit #, etc.

City *

State *
New York

ZIP code *

11213

First 5 digits required

County *

KINGS

Phone number *

XXX-XXX-XXXX

Phone number type *

Mobile

Email address *



Re-enter email address *


Are you a US Citizen? *

☐

Yes

☐

No

Do you have a dual citizenship? * ☐

Yes

☐

No

Country of residence *

Where are you currently living?



Date of birth *

MM/DD/YYYY

Employment & finances

Source of income *



Adding a co-applicant?

☐

Yes, add a co-applicant



You won't be able to edit this section later. So please review your information before you continue.

By selecting Continue, **you authorize us to obtain a credit report** or other report or account information from credit or information services agencies to help verify the information you provide in this application; for consideration of other accounts and services, and for any other lawful purpose. If your information does not meet certain qualifications, you will not be able to proceed with your application at this time.

Continue

Save for Later

[Cancel and exit application](#)