



NON-PERSONAL ACCOUNT APPLICATION

ACCT #: _____ BRANCH #: _____ DATE: _____

DEPOSIT AMOUNT: \$ _____ SOURCE OF FUNDS (new, transfer, etc): _____

ACCOUNT TITLE: _____

- ENTITY TYPE: [] SOLE PROPRIETOR [] PARTNERSHIP [] LLP (LIMITED LIABILITY) [] GP (GENERAL) [] LLC [] CORPORATION [] UNINCORPORATED ASSOC [] OTHER
ACCOUNT TYPE: [] JUST BUSINESS CHECKING [] JUST BUSINESS CHEKCING PLUS [] FLEX BUSINESS CHECKING [] BUSINESS MONEY MARKET [] ESCROW MANAGEMENT [] CD [] OTHER
CD INTEREST PAYMENT METHOD: [] ACCUMULATE [] MAIL MONTHLY [] MAIL QUARTERLY [] CREDIT ACCT # [] MONTHLY [] QUARTERLY [] OTHER

TAX ROLE:

NAME: _____ TIN: _____
ENTITY (PARTNERSHIP, CORPORATION, ETC.)

ADDRESS: _____ DATE OF INCORPORATION: _____
STREET (SUITE #)
CITY STATE ZIP

PHONE #: () FAX #: ()

EMAIL ADDRESS: _____ WEBSITE: _____

DEPT OF STATE VERIFICATION (INITIAL IF VERIFIED)

NON-TAX SIGNER:

NAME: _____ SS#: _____
FIRST M.I. LAST

ADDRESS: _____ D.O.B: _____
STREET (APT#)
CITY STATE ZIP TITLE:

HOME PHONE #: () WORK PHONE #: ()

INTERNET CUSTOMER? (Y/N): _____ EMAIL ADDRESS: _____

PERSONAL I.D.: _____
TYPE (driver's license) NUMBER (#)

CHEXSYSTEMS: _____

OPENED BY _____ DATE _____ REVIEWED BY _____ DATE _____

NON-TAX SIGNER:

NAME: _____ **SS#:** _____
FIRST M.I. LAST

ADDRESS: _____ **D.O.B.:** _____
STREET (APT#)

_____ **TITLE**
CITY STATE ZIP

HOME PHONE #: () **WORK PHONE #:** ()

INTERNET CUSTOMER? (Y/N): _____ **EMAIL ADDRESS:** _____

PERSONAL I.D.: _____
TYPE (driver's license) NUMBER (#)

CHEXSYSTEMS: _____

NON-TAX SIGNER:

NAME: _____ **SS#:** _____
FIRST M.I. LAST

ADDRESS: _____ **D.O.B.:** _____
STREET (APT#)

_____ **TITLE:**
CITY STATE ZIP

HOME PHONE #: () **WORK PHONE #:** ()

INTERNET CUSTOMER? (Y/N): _____ **EMAIL ADDRESS:** _____

PERSONAL I.D.: _____
TYPE (driver's license) NUMBER (#)

CHEXSYSTEMS: _____

NON-TAX SIGNER:

NAME: _____ **SS#:** _____
FIRST M.I. LAST

ADDRESS: _____ **D.O.B.:** _____
STREET (APT#)

_____ **TITLE**
CITY STATE ZIP

HOME PHONE #: () **WORK PHONE #:** ()

INTERNET CUSTOMER? (Y/N): _____ **EMAIL ADDRESS:** _____

PERSONAL I.D.: _____
TYPE (driver's license) NUMBER (#)

CHEXSYSTEMS: _____
