

BUSINESS ACCOUNT APPLICATION New Revised

Account #: _____

Business Name: _____ New Existing # _____*(Must match documentation provided)*

DBA Name (if applicable): _____

Physical Address: _____

Mailing Address: _____
(If different)

Tax ID #: _____ Business Phone #: _____ NAICS Code: _____

Business Website/Social Media Page(s): _____

Number ___ & Address of Other Locations: _____

Description of Business: _____ Date Business started? _____

Specific Products & Services Offered: _____

Is your business seasonal? Yes No If YES, what months? _____

Primary Trade Area (geographic location(s) served): _____

Previous Bank: _____

SIGNER INFORMATION**1. Name:** _____ New Existing # _____*(Must match documentation provided, including middle name)*

SSN: _____ DOB: _____ ID Type & #: _____ Exp: _____

Physical Address: _____
(If no address listed on identifying documentation, must provide proof of address)

Work Phone #: _____ Cell Phone #: _____ Home Phone #: _____

Email Address: _____

Occupation: _____ Employer: _____

Title: _____ NAICS Code: _____

Previous Bank: _____ Visa Check Card: Yes No Online Banking: Yes No**2. Name:** _____ New Existing # _____*(Must match documentation provided, including middle name)*

SSN: _____ DOB: _____ ID Type & #: _____ Exp: _____

Physical Address: _____
(If no address listed on identifying documentation, must provide proof of address)

Work Phone #: _____ Cell Phone #: _____ Home Phone #: _____

Email Address: _____

Occupation: _____ Employer: _____

Title: _____ NAICS Code: _____

Previous Bank: _____ Visa Check Card: Yes No Online Banking: Yes No

3. Name: _____ New Existing # _____

(Must match documentation provided, including middle name)

SSN: _____ DOB: _____ ID Type & #: _____ Exp: _____

Physical Address: _____

(If no address listed on identifying documentation, must provide proof of address)

Work Phone #: _____ Cell Phone #: _____ Home Phone #: _____

Email Address: _____

Occupation: _____ Employer: _____

Title: _____ NAICS Code: _____

Previous Bank: _____ Visa Check Card: Yes No Online Banking: Yes No

4. Name: _____ New Existing # _____

(Must match documentation provided, including middle name)

SSN: _____ DOB: _____ ID Type & #: _____ Exp: _____

Physical Address: _____

(If no address listed on identifying documentation, must provide proof of address)

Work Phone #: _____ Cell Phone #: _____ Home Phone #: _____

Email Address: _____

Occupation: _____ Employer: _____

Title: _____ NAICS Code: _____

Previous Bank: _____ Visa Check Card: Yes No Online Banking: Yes No

Is each signer a US Citizen? Yes – skip question A & B No – answer question A **OR** B

A. Are you a Resident Alien, with an issued Resident Alien Card or “Green Card?” If so, provide a copy of the card with proof of address, which could be a Texas DL/ID or any of the other approved documentation.

A1) What country are you a citizen of? _____

OR

B. Are you a Non-Resident Alien? If so, provide a copy of passport from country of citizenship along with proof of Texas residency, which could be a Texas DL/ID or any of the other approved documentation and obtain a signed W8BEN. (A SSN or ITIN is required for all accounts.)

B1) What country are you a citizen of? _____

Have any owners ever been a Foreign Political Leader or connected to the government of a foreign country? Yes No

Have any owners ever been a Domestic Political Leader or connected to the government? Yes No

Do any owners have relatives or close associates that are now or have been connected to the government? Yes No

Do any owners have relatives or close associates that are now or have been connected to the government of a foreign country? Yes No

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens/signs/owns an account. What this means for you: When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We will ask to see your driver's license or other identifying documents.

Signature: _____ Date: _____

(Owner/Manager/Member)

As part of our ongoing efforts to ensure compliance with the regulatory guidance, the following questions MUST be answered. We appreciate your assistance in providing this information.

Type of Account Requested: _____ Facsimile Signature Requested: Yes No

Opening Deposit Amount: _____ Opening Source: Cash Check Other _____

How did you hear about us? Newspaper Magazine Radio TV Billboard Word of Mouth

Drive-By Employee _____ Other _____

Purpose of Account: General/Operating Payroll Other _____

Would you like to order checks? Yes No If YES, what kind? Business Size Personal Size Wallet Duplicate

CD Account – Skip expected Deposit/Withdrawal Activity

What type of deposits do you expect on a monthly basis? (Check all that apply) None

Cash Checks Domestic Funds Transfers International Funds Transfers ACH Internal Transfers

DEPOSITS

What would the dollar range be for **CASH** deposits?

None <\$5K \$5K - \$10K \$10K - \$50K \$50K - \$150K \$150K - \$300K \$300K - \$500K >\$500K

What would the dollar range be for **CHECK** deposits?

None <\$5K \$5K - \$10K \$10K - \$50K \$50K - \$150K \$150K - \$300K \$300K - \$500K >\$500K

What would the dollar range be for **DOMESTIC FUNDS TRANSFER** deposits?

None <\$5K \$5K - \$10K \$10K - \$50K \$50K - \$150K \$150K - \$300K \$300K - \$500K >\$500K

What would the dollar range be for **INTERNATIONAL FUNDS TRANSFER** deposits?

None <\$5K \$5K - \$10K \$10K - \$50K \$50K - \$150K \$150K - \$300K \$300K - \$500K >\$500K

What countries: _____ Purpose: _____

What would the dollar range be for **ACH** deposits?

None <\$5K \$5K - \$10K \$10K - \$50K \$50K - \$150K \$150K - \$300K \$300K - \$500K >\$500K

What type of withdrawals do you expect on a monthly basis? (Check all that apply) None

Cash Checks Domestic Funds Transfers International Funds Transfers ACH Internal Transfers

WITHDRAWALS

What would the dollar range be for **CASH** withdrawals?

None <\$5K \$5K - \$10K \$10K - \$50K \$50K - \$150K \$150K - \$300K \$300K - \$500K >\$500K

What would the dollar range be for **CHECKS** written?

None <\$5K \$5K - \$10K \$10K - \$50K \$50K - \$150K \$150K - \$300K \$300K - \$500K >\$500K

What would the dollar range be for **DOMESTIC FUNDS TRANSFER** withdrawals?

None <\$5K \$5K - \$10K \$10K - \$50K \$50K - \$150K \$150K - \$300K \$300K - \$500K >\$500K

What would the dollar range be for **INTERNATIONAL FUNDS TRANSFER** withdrawals?

None <\$5K \$5K - \$10K \$10K - \$50K \$50K - \$150K \$150K - \$300K \$300K - \$500K >\$500K

What countries: _____ Purpose: _____

What would the dollar range be for **ACH** withdrawals?

None <\$5K \$5K - \$10K \$10K - \$50K \$50K - \$150K \$150K - \$300K \$300K - \$500K >\$500K

Does your business engage in and/or conduct the following activities? (Please check ALL that apply)

Cash Checks* Sell Money Orders* Sell Travelers Cheques* Lottery Sales* Transmit Funds*

Convenience Store* Online Gambling* Sell Gift Cards Jewelry Sales N/A

Will this account conduct any of the above activity? Yes No

If account will conduct any services with an asterisk (*), the account cannot be opened at this time

- Does your business conduct vehicle sales of any kind (cars, boat, airplanes, etc.)? Yes No
 If YES, do you conduct in-house financing? Yes No
- Is there an ATM on the premises of the business? Yes No
 If YES, how is the money replenished? _____
- Is your business a domestic charity? Yes No
- Does your business engage in internet-based sales? Yes No
 If YES, product/service sold? _____
- Does your business engage in international activities? Yes No
 If YES, describe _____
- Does your business derive funds from marijuana related activity? Yes No
 If YES, select from **one** listed Tier below that best fits your activity

Tier 1*	Tier 2	Tier 3
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Hydroponic Supplies	<input type="checkbox"/> Attorney
<input type="checkbox"/> Distribution	<input type="checkbox"/> Payment Processing	<input type="checkbox"/> Accountant
<input type="checkbox"/> Dispensing	<input type="checkbox"/> Product Packaging Supplies	<input type="checkbox"/> Registered Agent
<input type="checkbox"/> Infused Products (CBD)	<input type="checkbox"/> Advertising/Public Relations	<input type="checkbox"/> Commercial Property Leaser
<input type="checkbox"/> Industrial Hemp	<input type="checkbox"/> Licensing/Consulting	
	<input type="checkbox"/> Training/Education	
	<input type="checkbox"/> Marijuana Software	
	<input type="checkbox"/> Industry Association	

If this account will conduct any services with an asterisk (*), the account cannot be opened at this time.
 For tier 2 and tier 3 businesses: additional information will be requested after account opening.

BUSINESS DOCUMENTS NEEDED:

Additional documentation may be requested

Non-Profit: Bi-Laws, if applicable Minutes Certificate of Formation for Non-profit Corporation	*Partnership Company: Filed Certificate of Formation Partnership Agreement Certificate of Good Standing	*LLC Company: Filed Articles of Organization <u>OR</u> Filed Certificate of Formation Company/Operating Agreement Certificate of Good Standing	*Incorporated Company: Filed Certificate of Formation <u>OR</u> Filed Articles of Incorporation Minutes, signed Certificate of Good Standing
Association: Meeting Minutes	Sole Proprietorship: Assumed Name Certificate Tax ID Number or Social		

***Assumed Name Certificates: Any Corp, LLC, LP, LLP, or Professional Association using a DBA must file with the County and the State.
 *Both are required if a DBA is added.**

Certification Regarding Beneficial Owner(s) of Legal Entity Customer (on next page)

General Instructions:

What is this form?

To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify and record information about the beneficial owners of legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

Who has to complete this form?

This form must be completed by the person opening a new account on behalf of a legal entity with any of the following U.S. financial institutions: (i) a bank or credit union; (ii) a broker or dealer in securities; (iii) a mutual fund; (iv) a futures commission merchant; or (v) an introducing broker in commodities.

For the purpose of this form, a **legal entity** includes a corporation, limited liability company, or other entity that is created by a filing of public document with the Secretary of State or similar office, a general partnership and any similar business entity formed in the United States or a foreign country.

Legal entity does **NOT** include:

- Sole proprietorship,
- Unincorporated associations,
- Trusts not filed with the secretary of state, or
- Natural persons opening accounts on their own behalf.

What information do I have to provide?

This form requires you to provide the name, address, date of birth and social security number (or passport number or other similar information, the case of Non-US Persons) for the following individuals (i.e., the beneficial owners). **A copy of a government issued identification is required for each beneficial owner.**

- (i) Each individual, if any, who owns, directly or indirectly, **20 percent or more** of equity interests of the legal entity customer (e.g., each natural person that owns 20 percent or more of the shares of a corporation); **and**
- (ii) An individual with significant responsibility for managing the legal entity customer (e.g.; a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President Vice President, or Treasurer.

The number of individuals that satisfy this definition of “beneficial owner” may vary. Under section (i), depending on the factual circumstances, up to five individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (i), you must provide the identifying information of one individual under section (ii). It is possible that in some circumstances that same individual might be identified under both sections (e.g., the President of Acme, Inc who also holds a equity 30% interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to six individuals (i.e., one individual under section (ii) and five 20 percent equity holders under section (i)).

The financial institution may also ask to see a copy of a driver’s license or other identifying document for each beneficial owner listed on this form.

CERTIFICATION OF BENEFICIAL OWNER(S)

Persons opening an account on behalf of a legal entity (corporation, LLC or other similar business entity formed in the US or foreign country) must provide the following information:

a. Name and Title of Natural Person Opening Account:

b. Name, Type, and Address of Legal Entity for Which the Account is Being Opened:

c. The following information for each individual, if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns **20 percent or more** of the equity interests of the legal entity listed above: A DL/ID/Passport is required for all beneficial owner(s). *(If no individual meets this definition, please write "Not Applicable" or "N/A")

1.

Name: _____ Date of Birth: _____

Address (Residential or Business Street Address): _____

For U.S. Persons: Social Security Number: _____

For Non-U.S. Persons: Social Number, Passport Number and Country of Issuance or other similar identification number!: _____

2.

Name: _____ Date of Birth: _____

Address (Residential or Business Street Address): _____

For U.S. Persons: Social Security Number: _____

For Non-U.S. Persons: Social Number, Passport Number and Country of Issuance or other similar identification number!: _____

3.

Name: _____ Date of Birth: _____

Address (Residential or Business Street Address): _____

For U.S. Persons Social Security Number: _____

For Non-U.S. Persons Social Number, Passport Number and Country of Issuance or other similar identification number!: _____

4.

Name: _____ Date of Birth: _____

Address (Residential or Business Street Address): _____

For U.S. Persons Social Security Number: _____

For Non-U.S. Persons Social Number, Passport Number and Country of Issuance or other similar identification number!: _____

5.

Name: _____ Date of Birth: _____

Address (Residential or Business Street Address): _____

For U.S. Persons Social Security Number: _____

For Non-U.S. Persons Social Number, Passport Number and Country of Issuance or other similar identification number¹: _____

- d.** The following information for **one** individual with significant responsibility, for managing the legal entity listed above, such as:
- An executive officer or senior manager (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer); or
 - Any other individual who regularly performs similar functions.

(If appropriate, an individual listed under section (c) above may also be listed in this section (d)).

Name: _____ Date of Birth: _____

Address (Residential or Business Street Address): _____

For U.S. Persons: Social Security Number: _____

For Non-U.S. Persons: Social Number, Passport Number and Country of Issuance or other similar identification number¹: _____

I, (name of person opening account), hereby certify, to the best of my knowledge, that the information provided above is complete and correct. What this means for you: When you open/sign/own an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We will ask to see your driver's license or other identifying documents.

Signature: _____ Date: _____

¹In lieu of a passport number, foreign persons may also provide an alien identification card number, or number and country of issuance of any other government issued document evidencing nationality or residence and bearing a photograph or similar safeguard.

AFFIDAVIT OF IDENTITY

➤ Affidavit of Identity is to be used and notarized in the event that an Owner/Signer is not present at the time of opening the account. *This form is not needed for Beneficial Owners that may not be signing on the account.

STATE OF _____

COUNTY OF _____

BEFORE ME THE FOLLOWING AFFIANT APPEARED _____, ON THE ____ DAY

OF _____, 201__ PROVEN TO ME BY THE FOLLOWING VALID

IDENTIFICATION, WHICH A COPY HAS BEEN ATTACHED:

INSTRUMENT TYPE _____

INSTRUMENT NUMBER _____

INSTRUMENT EXPIRATION DATE _____

SIGNATURE OF AFFIANT: _____

NOTARY PUBLIC FOR THE STATE OF _____
COMMISSION EXPIRES _____

SEAL

For bank use only:

VERIFICATION OF IDENTITY

➤ Verification of Identity is to be used when bank personnel go to visit the customer to obtain a copy of their identification.

BEFORE ME APPEARED _____, ON THE _____ DAY OF _____,

201__ PROVEN TO ME BY A VALID IDENTIFICATION, WHICH A COPY HAS BEEN

ATTACHED AND THEIR SOCIAL SECURITY NUMBER _____

ACKNOWLEDGED BY: _____