



**Peoples Savings Bank**

**BUSINESS ACCOUNT APPLICATION**

**BUSINESS Information:**

Business/DBA Name \_\_\_\_\_

Physical Street Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Mobile \_\_\_\_\_

E-mail \_\_\_\_\_ Tax ID Number \_\_\_\_\_

Signer Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ SSN \_\_\_\_\_

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Business Website \_\_\_\_\_

Legal Organization of Business:  Sole Proprietorship  Partnership  Limited Liability Company  Corporation  
 Unincorporated Organization/Association  Club  Estate  Trust

What services do you plan to use in regard to this account? Check all that apply.  
 ACH  Wire Transfers  Cash Checks  Large cash deposits/withdrawals  Remote Deposit Capture

**Unlawful Internet Gambling Transactions prohibited:** If you are a commercial customer, you certify that you are not now engaged in, and during the life of your account with the bank will not engage in, any activity or business that is unlawful under the Unlawful Internet Gambling Enforcement Act of 2006. You may not use your account or any other service we offer to receive any funds, transfer, credit, instrument or proceeds that arise out of a business that is unlawful under the UIGEA. You agree that if anyone asks us to process a transaction that we believe is restricted under the UIGEA, we may block the transaction and take any other action we deem to be reasonable under the UIGEA.  
Initials: \_\_\_\_\_ Initials: \_\_\_\_\_

Filed with Secretary of State:  Yes  No

*Please Note: Federal regulation requires that the Bank have on file verification of consumer's identification. Please be aware as part of our identification process, we may request a copy of your registration with the State in which you are filed and/or a copy of your taxpayer identification number assignment.*

Is there any member(s) of your organization that owns more than 25% equity?  YES  NO

If you checked one or more of the above questions, please complete below:

Name and Title of Natural Person Opening Account: \_\_\_\_\_

The following information for **each individual**, if any, who directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns **25%** or more of the equity interest of the legal entity listed above:

NAME	DOB	ADDRESS (Residential Address)	SSN/TIN	For Foreign Persons: Passport Number and country of Issuance, or other similar id number

List one individual with significant responsibility for managing the legal entity, 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.)

NAME	DOB	ADDRESS (Residential Address)	SSN/TIN	For Foreign Persons: Passport Number and country of Issuance, or other similar id number

I hereby certify, to the best of my knowledge, that the information provided above is complete and correct. I agree to notify the bank of any change in the above information. I authorize this financial institution to verify all information provided, and to obtain additional information regarding my business from a consumer-reporting agency or agencies. I understand that this information will only be used in conjunction with Peoples Savings Bank products and services requested by me and that it will remain in force for the duration of my association.

X \_\_\_\_\_ Title \_\_\_\_\_ Date: \_\_\_\_\_  
*Signature of account owner or authorized agent*

**BANK USE ONLY**

Sole Proprietorship/DBA

- CIP for owner
- If surname is not part of business name, obtain registration with county recorder's office

Partnership

- CIP from each partner
- Obtain copy of written partnership agreement (*if applies*)
- Secretary of State Registration (*if applies*)

Limited Liability Company (LLC)

- CIP from each signer
- Secretary of State Registration
- Articles of Incorporation
- Signed resolution from Deposit Pro/Laser Pro

Corporations

- CIP from each signer
- Secretary of State Registration
- Articles of Incorporation
- Signed resolution from Deposit Pro/Laser Pro

Club

- CIP from each signer
- Organization Resolution or Meeting Minutes

Estate

- Letter of Testamentary or Letter of Administration
- CIP Estate and Executor

Trust

- Copy of Trust Agreement
- CIP Trust and Trustee

Check all that applies:

- OFAC

Discrepancies: \_\_\_\_\_

- Credit Report Pulled

Discrepancies: \_\_\_\_\_

- Social Security Number/Tax Identification Number Verified

Discrepancies: \_\_\_\_\_

- Obtained Physical Address

Discrepancies: \_\_\_\_\_

- Send Thank You

Drivers License Expired: Yes or No

Discrepancies: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

Account Opened By: \_\_\_\_\_

Reviewed By: \_\_\_\_\_