



# COMMERCIAL RELATIONSHIP PACKET

## Entity Information

### ORGANIZATIONAL INFORMATION (PLEASE INCLUDE ALL ORGANIZATIONAL DOCUMENTS; EX. EIN LETTER, ARTICLES, OPERATING AGREEMENT, ETC.)

SECURE  
FILE  
UPLOAD

Business Name: \_\_\_\_\_

Assumed Name (if applicable): \_\_\_\_\_

\*Assumed name certificate is required if assumed name is to be included on account.

Entity Type:  (Hover to select)

Tax Election:  (Hover to select) Tax ID Number: \_\_\_\_\_

NAICS Code: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address (if applicable): \_\_\_\_\_

Business Phone Number: \_\_\_\_\_

Business Email Address: \_\_\_\_\_

Account Name(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### CONTROLLER/MANAGER INFORMATION (MAIN BANKING CONTACT AND/OR PERSON MOST RESPONSIBLE FOR BANKING DECISIONS)

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Email Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**BENEFICIAL OWNERSHIP INFORMATION** (PLEASE INCLUDE A COPY OF EACH BENEFICIAL OWNER'S STATE ISSUED ID OR DRIVERS LICENSE)

SECURE FILE UPLOAD

List any person with 25% or more ownership of the entity.

\*A Beneficial Owner cannot be another entity.

**1** Name: \_\_\_\_\_ % \_\_\_\_\_ SSN: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_

**2** Name: \_\_\_\_\_ % \_\_\_\_\_ SSN: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_

**3** Name: \_\_\_\_\_ % \_\_\_\_\_ SSN: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_

**4** Name: \_\_\_\_\_ % \_\_\_\_\_ SSN: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_

**AUTHORIZED SIGNERS** (PLEASE INCLUDE A COPY OF EACH SIGNER'S STATE ISSUED ID OR DRIVERS LICENSE)

SECURE FILE UPLOAD

**1** Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Last 4 digits of SSN: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_

**2** Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Last 4 digits of SSN: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_

**3** Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Last 4 digits of SSN: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_

**4** Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Last 4 digits of SSN: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_

**5** Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Last 4 digits of SSN: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_



### ADDITIONAL INFORMATION

**Debit Cards**     Yes     No

Account: \_\_\_\_\_

Account: \_\_\_\_\_

Cardholders: \_\_\_\_\_

Cardholders: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Internet Banking Administrator**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Cell Number: \_\_\_\_\_

**Checks**

Wallet     Wallet w/Duplicate

Three to a Page     Quickbooks Compatible

Other: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

