



Business Account Profile

To be completed by member

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 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 may also ask to see your driver's license or other identifying documents.

SELECT ONE: Sole Proprietor LLC Partnership - General Partnership - Limited S Corporation
 Organizations & Associations Corporation Non-Profit Organization Non-Profit Corporation

Business Name _____ Tax ID Number _____

Business Address (No PO Box) _____
STREET ADDRESS CITY STATE ZIP CODE

Mailing Address _____
STREET ADDRESS CITY STATE ZIP CODE

Business Phone _____ Cell Phone Principal Owner/Officer _____

Email(s) _____

Time in Business _____ Company Website _____

Nature of Business _____

LEVEL OF OWNERSHIP AND/OR SIGNING AUTHORITY (List Owners Full Names)

% of Ownership
(would be 0% if only a signer) **Signer**
(on account)

Name _____	Title _____	_____ %	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____	Title _____	_____ %	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____	Title _____	_____ %	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____	Title _____	_____ %	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____	Title _____	_____ %	<input type="checkbox"/> Yes <input type="checkbox"/> No

Are you a money service business (e.g. check cashing, money transmitter)? Yes No

Does your business owe any taxes for years prior to the current year? (Income, real estate, property, etc.) Yes No

Is your business a party to any claim or lawsuit current or pending? Yes No

Are there any outstanding judgments/liens against the business? Yes No

Is your business involved in any gambling activities, including internet gambling? Yes No

Are you a marijuana related business? Yes No

Are you a professional service provider (e.g. Accountant, Lawyer, Investment broker)? Yes No

Do you own, operate or replenish an ATM? Yes No

I authorize Bellco Credit Union to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statement contained in the attachments are true, complete and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

Signature _____ Date _____

Signature _____ Date _____

Signature _____ Date _____

Signature _____ Date _____

Signature _____ Date _____

*Bellco Credit Union does not do business with any organization involved in gaming or any illegal activity