



Corporate Account Profile

Type of Account(s)

- | | |
|---|--|
| <input type="checkbox"/> Affinity Bank Loan _____ # of Accounts | <input type="checkbox"/> Business Checking _____ # of Accounts |
| <input type="checkbox"/> Money Market _____ # of Accounts | <input type="checkbox"/> Other Accounts _____ # of Accounts |

Comments: _____

Corporate Name _____

Other Name (DBA) _____

Tax ID _____

Physical Address _____

Mailing Address _____

*If Different than Physical

Contact Name _____

Contact Title _____

Phone Number _____

Fax Number _____

Email Address _____

How did you hear about us? _____

Type of Company

- Corporation LLC LLP Sole Proprietor Association Other

*Supporting Documentation for Type of Business
(Articles of Incorporation or similar documentation)*

Driver's License Required

Loan Guarantor Yes No
Deposit Signer Yes No

Account Name _____
Prefix Miss Ms Mrs Mr Dr
Signers Name _____
Signers DOB _____
Home Address _____

SSN _____
Title _____
Email _____
Home Number _____
Cell Number _____

Loan Guarantor Yes No
Deposit Signer Yes No

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Beneficial Ownership

Certification Regarding Beneficial Owners of Legal Entity Customers

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 purposes of this form, a legal entity includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a 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 proprietorships, unincorporated associations, 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, in the case of foreign persons) for the following individuals (i.e., the beneficial owners):

(i) Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 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 four 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 the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30 percent equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii) and four 25 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 must provide the following information:

- a) Name Person Opening Account: _____
- b) Title of Person Opening Account: _____
- c) Business Name of Legal Entity: _____
- d) Street Address of Legal Entity: _____
- e) The following information for each individual, if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 25 percent or more of the equity interests of the legal entity listed above:

If no individual meets this definition, please check this box indicating "Not Applicable."

Name	Date of Birth	Street Address	Social Security Number

** For foreign persons, please include a passport number and country of issuance or other similar ID number. In 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.*

- f) 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 (e) above may also be listed in this section (f)).

Name & Title	Date of Birth	Street Address	Social Security Number

** For foreign persons, please include a passport number and country of issuance or other similar ID number. In 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.*

I, _____ (name of person opening account), hereby certify, to the best of my knowledge, that the information provided above is complete and correct.

Signature: _____

Date: _____



Bank Use Only

This form is required for all New Accounts to be opened. Please note that failure to complete this form and submit the required documentation will delay processing this request.

Account Officer: _____

Client/Business Name: _____

*Account Name(s)/Subtitles: _____

*If Different than Business Name _____

SUPPORTING DOCUMENTS:

Supporting Documents may not be required for Existing Clients unless the account being opened is a separate entity to the existing account or if additional signers are being added to the new account.

- Corporate Deposit Profile Yes No Notes: _____
- Articles of Incorporation (*or similar*) Yes No Notes: _____
- Bylaws (if applicable) Yes No Notes: _____
- Driver's License (for all signers) Yes No Notes: _____
- Signed Beneficial Ownership Form Yes No Notes: _____
- 3 Months Bank Statements Yes No Notes: _____
*(required for transition consideration)
- 3 Months Merchant Statements Yes No Notes: _____
*(required for merchant analysis)

ACCOUNT SERVICES:

- | | |
|--|---|
| <ul style="list-style-type: none"> ACH Origination <input type="checkbox"/> Yes <input type="checkbox"/> No Business Check Card <input type="checkbox"/> Yes <input type="checkbox"/> No Checks (<i>order form required</i>) <input type="checkbox"/> Yes <input type="checkbox"/> No <li style="padding-left: 20px;">1st Order Waived <input type="checkbox"/> Yes <input type="checkbox"/> No Courier Service <input type="checkbox"/> Yes <input type="checkbox"/> No Line of Credit Linked <input type="checkbox"/> Yes <input type="checkbox"/> No
<small>(Chip's approval to add to OLB)</small> Merchant Services <input type="checkbox"/> Yes <input type="checkbox"/> No
<small>*(3 Month Merchant Statements Required)</small> Mobile Deposit <input type="checkbox"/> Yes <input type="checkbox"/> No Non-Signer eStatement <input type="checkbox"/> Yes <input type="checkbox"/> No Online Banking <input type="checkbox"/> Yes <input type="checkbox"/> No | <ul style="list-style-type: none"> Online Bill Pay <input type="checkbox"/> Yes <input type="checkbox"/> No Online Wires <input type="checkbox"/> Yes <input type="checkbox"/> No Paper Statements <input type="checkbox"/> Yes <input type="checkbox"/> No
<small>*(fee charged)</small> Remote Deposit <input type="checkbox"/> Yes <input type="checkbox"/> No
<small>*(minimum balance \$25k or fee charged)</small> Ship Scanner: <input type="checkbox"/> Yes <input type="checkbox"/> No Shipping Address: _____ |
|--|---|
- Admin Name: _____
- Admin Email: _____

NOTES & SPECIAL INSTRUCTIONS:

- Document Delivery Email to Client FedEx to Client
 Return to Employee _____
- Industry Concentration Dental Medical
 Other _____

College/Dental School _____

Overdraft Protection To: _____ From: _____

Notes: _____

Account Officer's Signature: _____

Deposit Operations Signature: _____



Account Name: _____

Account Type: _____

<p>Anticipated Monthly Deposit Activity</p> <p>Total Deposits \$ _____</p> <p>_____ % Cash</p> <p>_____ % Checks</p> <p>_____ % Currency Exchange</p> <p>_____ % ACH</p> <p>_____ % Domestic wire transfers</p> <p>_____ % Foreign wire transfers-List countries</p> <p>100 %</p>	<p>Anticipated Monthly Withdrawal Activity</p> <p>Total Debits \$ _____</p> <p>_____ % Cash/Debit Card</p> <p>_____ % Checks</p> <p>_____ % Currency Exchange</p> <p>_____ % ACH</p> <p>_____ % Domestic wire transfers</p> <p>_____ % Foreign wire transfers-List countries</p> <p>100 %</p>
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Amount of opening Deposit \$ _____

Source of Funds: Check _____ Cash _____ Internal Transfer _____ Wire Transfer _____ Other _____

If funded by Check, from what institution: _____

If funded by Internal Transfer what account number: _____

Account Name: _____

Account Type: _____

<p>Anticipated Monthly Deposit Activity</p> <p>Total Deposits \$ _____</p> <p>_____ % Cash</p> <p>_____ % Checks</p> <p>_____ % Currency Exchange</p> <p>_____ % ACH</p> <p>_____ % Domestic wire transfers</p> <p>_____ % Foreign wire transfers-List countries</p> <p>100 %</p>	<p>Anticipated Monthly Withdrawal Activity</p> <p>Total Debits \$ _____</p> <p>_____ % Cash/Debit Card</p> <p>_____ % Checks</p> <p>_____ % Currency Exchange</p> <p>_____ % ACH</p> <p>_____ % Domestic wire transfers</p> <p>_____ % Foreign wire transfers-List countries</p> <p>100 %</p>
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