



COMMERCIAL ACCOUNT INFORMATION FORM

Type of Entity? _____		
Business/Entity legal Name: _____		
Additional Tradename, DBA, etc. _____		
Is Customer a Publicly Traded Company?	____ Yes	____ No
Is the customer a fund/pooled investment vehicle?	____ Yes	____ No
Is the customer a Disregarded Entity?	____ Yes	____ No
Tax ID Type: _____	Tax ID # _____	
NAICS CODE: Provide the 6-digit Code _____		
Address Line 1: _____		
Address Line 2: _____		
City: _____	State: _____	ZIP: _____
Check this box if Mailing address is the same as Physical Address		
Mailing address Line 1: _____		
Mailing address Line 2: _____		
City: _____	State: _____	ZIP: _____
Business Phone: _____	Alternate Phone: _____	
E-mail / Website: _____		
Nature or General Description of Customers Business: _____		
Type of Account	____ Checking	____ Savings
Source of Funds:	____ Cash	____ Check
		____ Certificate of Deposit
		____ Internal Transfer
How many Signatures are required for transactions on this account? _____		
Are there any restrictions to access on this account _____		
Source of wealth:		
Choose the value that most closely aligns to the economic activity that generated the customer's net worth.		
____ Debt Issuance / Restructure	____ Investment Proceeds	____ Sale of assets (Property, Division)
____ Fund Management	____ Loan Proceeds	____ Secondary Offering/Private Equity/IPO
____ Grants/Contributions	____ Operating Revenue	____ Tax Revenue
____ Insurance Proceeds	____ Pension / Profit Sharing/ Employee Benefit	____ Other
If other, please describe: _____		

Does any individual on this Customer Information Form or on the Certificate of Beneficial Owners Form (if applicable) serve as a Principal Shareholder (10% or greater), Executive Officer and/or Director of any bank?

☐ Yes ☐ No

Is the Customer directly or indirectly owned 25% or more by a non-U.S. Government? ☐ Yes ☐ No

Is the customer engaged in Internet Gambling Business ? ☐ Yes ☐ No

Legal Entity Owners Information:

Legal Entity Owners are non-individuals that maintain an ownership interest in the Customer Entity. Identify all Legal Entity Owners that directly or indirectly own 25% or more of the equity interest of the Customer Entity.

Does the customer have Legal Entity Owners with 25% or greater direct or indirect ownership interest?

☐ Yes ☐ NO

Legal Entity Owner Name :

Organization Type:

Provide percentage of ownership of the customer entity

Does the Legal Entity Owner play an additional role (s)?

☐ General Partner ☐ Guarantor ☐ Limited Partner ☐ Member ☐ Trustee ☐ Other

Tax/Government ID Information

ID TYPE

ID Number

Legal Entity Registered Address

Address Line 1:

Address Line 2:

City, State, Zip:

Physical Address

(No PO Boxes)

Address Line 1:

Address Line 2:

City, State, Zip:

Check this box if mailing address is the same as physical address

Mailing address Line 1:

Mailing address Line 2:

City:

State:

ZIP:

Legal Entity Owners Information:

Legal Entity Owners are non-individuals that maintain an ownership interest in the Customer Entity. Identify all Legal Entity Owners that directly or indirectly own 25% or more of the equity interest of the Customer Entity.

Does the customer have Legal Entity Owners with 25% or greater direct or indirect ownership interest?

____ Yes ____ NO

Legal Entity Owner Name : _____

Organization Type: _____

Provide percentage of ownership of the customer entity _____

Does the Legal Entity Owner play an additional role (s)?

____ General Partner ____ Guarantor ____ Limited Partner ____ Member ____ Trustee ____ Other

Tax/Government ID Information

ID TYPE N/A **ID Number** N/A

Legal Entity Registered Address

Address Line 1: _____

Address Line 2: _____

City, State, Zip: _____

Physical Address (No PO Boxes)

Address Line 1: _____

Address Line 2: _____

City, State, Zip: _____

Check this box if mailing address is the same as physical address

Mailing address Line 1: _____

Mailing address Line 2: _____

City: _____

State: _____

ZIP: _____

Related Parties Information

Related Parties include key decision makers, and parties significant to the customer entity other than the "Person with Significant Control" (Control Prong) noted on the Certification of Beneficial Owners Form. Examples include, but are not limited to: Corporation – CEO, CFO; Limited Liability Company – LLC Manager or Managing Members; Partnerships – General Partner(s); Funds/Pooled Investment Vehicles – Investment Advisor, Fund Administrator. Please also include guarantors in this section.

Does the customer have any related parties that needs to be reflected based on the above ☐ Yes ☐ No

Related Party

Related Party Name : _____

Related Party Type _____

Will this person be a signer on the account? ☐ Yes ☐ No

What Role(s) does the Related Party Play?

☐ General Partner ☐ Guarantor ☐ Limited Partner ☐ Member ☐ Trustee ☐ Manager
☐ President ☐ Treasurer ☐ Key Executive ☐ Board of Directors ☐ Account Associated
☐ Authorized Financial Representative _____

Does this party have limitations? ☐ Yes ☐ No

Describe Limitations N/A

Date of Birth: _____

Please provide a copy of the Government ID used for verification

Tax/Government ID Number: _____ State of Issue _____

Issue Date: _____ Expiration date: _____

Tax ID Type SSN ID Number _____

Physical Address (NO PO BOXES)

Address Line 1: _____

Address Line 2: _____

City, State, Zip: _____

☐ Check this box if mailing address is the same as physical address

Mailing address Line 1: _____

Mailing address Line 2: _____

City: _____ State: _____ ZIP: _____

Member FDIC

Division of First Bank and Trust of Memphis