

**BUSINESS ACCOUNT CARD**

Credit Union Use Only

Date Open/Accepted: \_\_\_\_\_

**Step 1 - Business Account Information and Ownership**  New Accounts  Change (describe) \_\_\_\_\_

Business Name (as recorded with IRS): \_\_\_\_\_ TIN/SSN: \_\_\_\_\_

Sole Proprietorship/DBA Name: \_\_\_\_\_

Street Address (required): \_\_\_\_\_ Business Phone \_\_\_\_\_

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

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

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

Cell/Home Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Step 2- Business Types and Required Documents**

Sole Proprietorship/DBA		Partnership	Single or Multi Member Limited Liability		Unincorporated Club or Association	Corporation
<input type="checkbox"/> SSN or TIN	<input type="checkbox"/> Business License	<input type="checkbox"/> TIN <input type="checkbox"/> Business License <input type="checkbox"/> Partnership Agreement	<input type="checkbox"/> SSN or TIN <input type="checkbox"/> Business License <input type="checkbox"/> Formation Agreement <input type="checkbox"/> Operating Agreement	<b>Tax Classification</b> <input type="checkbox"/> D=Disregarded <input type="checkbox"/> P=Partnership <input type="checkbox"/> C=Corporation	<input type="checkbox"/> TIN <input type="checkbox"/> Minutes or Letter of Authorization	<input type="checkbox"/> TIN <input type="checkbox"/> Business License <input type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Bylaws (if applicable)

**Step 3-Account Products** (Check the gray box of the product you are interested in opening or changing - one check per line only)

Credit Union Use Only Account #	Business Membership Account	Opportunity Checking	Interest Checking	Savings	Money Market	Premium Money Market	Certificate Term Circle one	Certificate Rate

Funds to be transferred from (acct# &amp; type):

 Check Attached  Other Please Describe: \_\_\_\_\_**Step 4-Account Services**

Select the account services you would like:

 Direct Deposit  Debit Card  Online Banking  Payroll Services  Overdraft Protection. Indicate the Savings, Money Market, or line of credit account number the funds will draw from if needed. 1. \_\_\_\_\_ 2. \_\_\_\_\_  
 Merchant Services  Paper Statements  Online Bill Pay  
 Electronic Statements  Checks Starting # \_\_\_\_\_
**Step 5-TIN Certification and Backup Withholding Information**

By signing below, I (Member) certify under penalties of perjury that: (i) I am a US citizen or other US person, (ii) the Taxpayer Identification Number (TIN)/Social Security Number (SSN) shown is my correct identification number and (iii) I am NOT, unless designated below, subject to backup withholding because I am exempt or I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all dividends or interest, or because the IRS has notified me that I am no longer subject to backup withholding.

 I am subject to backup withholding  I am not a US citizen or resident (complete W8 form)  Exempt Payee Code: \_\_\_\_\_

By signing below, each of the signers certifies and agrees that the terms of this Account Card apply to the Account Owner listed above. By signing below, I/We agree to the terms and conditions of the Business Membership and Account Agreement, Truth-in-Savings Rate and Fee Schedule, Funds Availability Policy Disclosure, if applicable, and to any amendment the Credit Union makes from time to time which are incorporated herein. I/We acknowledge receipt of a copy of the Agreement and Disclosures applicable to the accounts and services requested herein. If a VISA Check Card or EFT service is requested and provided, I/we agree to the terms of and acknowledge receipt of the Electronic Funds Transfer Agreement. *The Internal Revenue Service does not require your consent to any provision of this Account Card other than the certifications required to avoid backup withholding*

**Step 6-Owner/Officer Information:**  Signer

Owner (First, Middle Initial and Last) \_\_\_\_\_ SSN \_\_\_\_\_ Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Home Phone \_\_\_\_\_ Birth Date \_\_\_\_\_ Address \_\_\_\_\_ DL# \_\_\_\_\_ PASSWORD: \_\_\_\_\_

**Co-Owner/Officer #2**  Signer  Joint Owner (DBA Only)

Co-Owner (First, Middle Initial and Last) \_\_\_\_\_ SSN \_\_\_\_\_ Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Home Phone \_\_\_\_\_ Birth Date \_\_\_\_\_ Address \_\_\_\_\_ DL# \_\_\_\_\_ PASSWORD: \_\_\_\_\_

**Co-Owner/Officer #3**  **Signer**

Co-Owner (First, Middle Initial and Last) SSN Title Signature Date

Home Phone Birth Date Address DL# PASSWORD:

**Co-Owner/Officer #4**  **Signer**

Co-Owner (First, Middle Initial and Last) SSN Title Signature Date

Home Phone Birth Date Address DL# PASSWORD:

**Step 7- Non-Owner/Officer Authorized Signer**

#1 (First, Middle Initial and Last) SSN Title Signature Date

Home Phone Birth Date Address DL# PASSWORD:

**Signer #2**

#2 (First, Middle Initial and Last) SSN Title Signature Date

Home Phone Birth Date Address DL# PASSWORD:

**AUTHORIZATION TERMS & CONDITIONS**

- 1. ACCOUNT OWNER.** The Account Owner name shown above is the complete and correct name of the Account Owner. If applicable, all registered assumed names under which the Account Owner does business are shown on the front side. Each corporate officer, partner, member, or trustee (as applicable) warrants that the Account owner has been duly formed and currently exists.
- 2. Authorized Parties.** The person signing above (Signers) presently occupy the positions listed and are authorized to transact business on behalf of the Account Owner. Each signer agrees to notify the Credit Union in writing of any change in authority. The Credit Union may request any other evidence of a Signer's authority at any time.
- 3. Authority.**
  - a. Each Signer certifies and agrees that the Account Owner's accounts will be governed by the terms set forth in the Membership and Account Agreement and Account Card, as amended from time to time.
  - b. The Credit Union is directed to accept and pay without further inquiry any item, bearing the appropriate number of signatures as indicated on the front side, drawn against any of the Account Owner's accounts. Unless otherwise indicated, any one Authorized Signer is expressly authorized to endorse all items payable to or owned by the Account Owner for deposit with or collection by the Credit Union and to execute such other agreements and to perform any other transaction under the Agreement.
  - c. The Account Owner is authorized to borrow from Credit Union, to mortgage, pledge and to grant a security interest in any property of Account Owner as security for payment of any loans and to guaranty any obligations with Credit Union, as applicable, on such terms as may be agreed upon between any Authorized Signer and Credit Union, and in such amounts as in its judgment should be borrowed, without limitation. Each Authorized Signer is authorized to execute and deliver all required loan documents on such terms as may be agreed upon including but not limited to: promissory notes, mortgages, trust deeds, security agreement, financing statements and guaranty agreements of the Credit Union. Each Authorized Signer is authorized to request advances, to perform such other acts and execute other documents as they may in their discretion deem reasonably necessary and proper in order to effect these resolutions.
  - d. Any persons authorized to receive account information, if applicable, are authorized to receive from the Credit Union, either orally or in writing, any information related to the account. Those persons are not authorized to withdraw funds or issue checks/drafts against or make any transaction related to the account. The authority given to the Authorized Signers and persons authorized to receive account information shall remain in full force until written notice of revocation is delivered to and received by the Credit Union at each location where an account is maintained. Any such notice shall not affect any items in process at the time notice is given. An authorized officer, trustee, or agent of the Account Owner will notify the Credit Union of any change in the Account Owner's composition, assumed business names, or any aspect of the entity affecting the deposit relationship between the Account Owner and the Credit Union before any such change occurs. The Credit Union shall have no duty to inquire as to the powers and duties of any Signer and shall have no notice of any breach of fiduciary duties by any Signer unless the Credit Union has actual notice of wrongdoing.
- 4. LIABILITY.** The Account Owner agrees that the Credit Union shall not be liable for any losses due to the Account Owner's failure to notify the Credit Union of such changes. Account Owner and each Signer agree to indemnify and hold Credit Union harmless of any claim or liability as a result of unauthorized acts of any Signer or former Signer or acts of any Signer upon which Credit Union relies prior to notice of any account change or change of Account Owner.

**AGREEMENT BETWEEN VERITY CREDIT UNION AND ACCOUNT HOLDER(S)** It is agreed that owners, co-owners and authorized signers must transact such business on the account as allowed by Verity Credit Union's Bylaws. Endorsements made by rubber stamp bind the account holder. This agreement takes the place of previous agreements on this account. The account holder may terminate this agreement by writing a letter, which must be received by Verity Credit Union to be effective.

**Credit Union Use Only**

Date Opened/Accepted \_\_\_\_\_ Approved By and Date \_\_\_\_\_ Verified Signature

Opened By (name and teller #) \_\_\_\_\_ Picture ID Attached

Branch \_\_\_\_\_ Date sent to Fileroom \_\_\_\_\_ OFAC and Chexsystems for Authorized Signers \_\_\_\_\_

OFAC and Chexsystems for Business \_\_\_\_\_