



ACCOUNT APPLICATION (NON-PERSONAL)

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.

SERVICES DESIRED: Checking Savings Money Market Savings Certificate of Deposit
 Business Debit Card Business Credit Card Business Loan Merchant Processing

ACCOUNT TITLE _____

DBA (if different from account title) _____

YEARS IN BUSINESS (if less than one year, actual startup date) _____

TAX IDENTIFICATION NUMBER _____ Non-Profit? Yes No

FORM OF BUSINESS Sole Proprietorship Partnership Corporation LLP LLC
 Association/Organization Government/Political Other _____

NATURE OF BUSINESS/ORGANIZATION _____

Estimate your monthly cash deposits \$ _____

Will your business have Direct Deposits (ACH)? Yes No

If yes, explain _____

Will your business make Wire Transfers? Yes No

If yes, explain _____

Do you own or operate an ATM? Yes No

If yes, how do you fund it? _____

Does this business engage in Internet gambling as defined in Federal Reserve Bank

Regulation GG? Yes No

IMPORTANT NOTICE You may not use any account with us in connection with any business of placing, receiving or otherwise knowingly transmitting bets or wagers by any means which involves the use, at least in part, of the Internet, or for any other transaction which is prohibited by Federal Reserve Regulation GG – Unlawful Internet Gambling Enforcement Act of 2006.

BUSINESS ADDRESS _____

City _____ State _____ Zip _____

MAILING ADDRESS (if different) _____

City _____ State _____ Zip _____

BUSINESS PHONE _____ Primary Contact Signer _____

BANK REFERENCE _____

REASON FOR CHOOSING FIRST MINNETONKA CITY BANK Print Advertising Other Advertising

Location Rate/Newspaper Letter Recommended by _____

FOR INTERNAL USE ONLY

Chex Systems	Remarks	Business Documents Obtained <input type="checkbox"/> Yes <input type="checkbox"/> No	MN SOS Date
OFAC <input type="checkbox"/> Match <input type="checkbox"/> No Match	Port #/Account #	Officer	Date

