



For Bank Use Only Account Number: _____

Waverly Office
609 Pacific Ave
Waverly MN 55390
763-658-4417

Mailing Address
PO Box 68
Waverly MN 55390

Montrose Office
145 Nelson Blvd
Montrose MN 55363
763-675-2265

bankwaverly.com • bankmontrose.com

BUSINESS DEPOSIT ACCOUNT APPLICATION

Business Account Name _____ Date _____

Current Customer Yes No If yes, please provide account number(s) if available _____

Tax/Employer Identification # (or Soc. Sec. # if none) _____

Street Address _____ Phone # _____

Mailing Address (if different) _____ Fax # _____

Business Web Address _____ Business Email _____

Type of Business Organization

- Organization-Unincorporated Non-Business Association of Individuals Doing Business As
- Sole Proprietorship Partnership Limited Liability Partnership Limited Liability Company IOLTA
- Corporation-Describe: For Profit Not for Profit

Briefly describe the nature of the business _____

The following documentation must be provided in order to open an account and may vary based on the structure of the business. Any incomplete or missing documentation will cause a delay in opening your account.

- One of the following documents based your business type:
 - Articles of Incorporation with a Certificate of Incorporation
 - Articles of Organization with a Certificate of Organization
 - Partnership Agreement
- Additional documentation based on your business type:
 - Certificate of Good Standing or Secretary of State documentation
 - Certificate of Assumed Name
 - Bylaws or Operating Agreement
- Documentation verifying your Tax ID or EIN Number
- Banking Authority Resolution identifying the person(s) authorized to open/maintain bank accounts. Must be certified by the Secretary of the business. If the Secretary is the same as an Officer with signing authority, another Officer or Director should sign the resolution. (Bank provides this form)
- Signature Card (Bank provides this form)

Business Owner Information

By signing below, you are certifying that everything in this application is correct. By providing an email address, you authorize us to contact you via email with bank related communications. You are also authorizing the Bank to check your credit history.

Owner/Authorized Signer Name _____ **Current Customer** Yes No

Street Address _____ Home Phone # _____

Mailing Address _____ Mobile Phone # _____

City, State, Zip _____ Work Phone # _____

Social Security # _____ Date of Birth _____

Driver's License # _____ Exp. Date _____

Email _____

Signature _____ Date _____

Owner/Authorized Signer Name _____ **Current Customer** Yes No

Street Address _____ Home Phone # _____

Mailing Address _____ Mobile Phone # _____

City, State, Zip _____ Work Phone # _____

Social Security # _____ Date of Birth _____

Driver's License # _____ Exp. Date _____

Email _____

Signature _____ Date _____

Owner/Authorized Signer Name _____ **Current Customer** Yes No
 Street Address _____ Home Phone # _____
 Mailing Address _____ Mobile Phone # _____
 City, State, Zip _____ Work Phone # _____
 Social Security # _____ Date of Birth _____
 Driver's License # _____ Exp. Date _____
 Email _____
Signature _____ Date _____

Owner/Authorized Signer Name _____ **Current Customer** Yes No
 Street Address _____ Home Phone # _____
 Mailing Address _____ Mobile Phone # _____
 City, State, Zip _____ Work Phone # _____
 Social Security # _____ Date of Birth _____
 Driver's License # _____ Exp. Date _____
 Email _____
Signature _____ Date _____

For additional owners, principles and signers, please use a separate sheet.

Account Purpose: Operating Payroll Escrow Other _____
 Does the business own or lease an onsite ATM? Yes No Will funds be used to fill the ATM? Yes No
 Where does the business operate? Local Multi-state National International
 Expected number of Deposits and Checks per month? _____
 ACH Activity: Automatic Withdrawals (# _____) Direct Deposits (# _____)

Average Total Balances		Average Monthly Cash Deposits		Average Monthly Cash Withdrawals	
\$ _____		\$ _____		\$ _____	

Domestic Wires				International Wires			
Incoming		Outgoing		Incoming		Outgoing	
# _____	\$ _____	# _____	\$ _____	# _____	\$ _____	# _____	\$ _____

Is Business interested in Remote Deposit Capture? Yes No
 Is Business interested in Credit Card processing services? Yes No

Money Service Business Activity

Determine whether the Business is a Money Service Business (MSB). If yes to any of the following questions, please complete additional MSB Determination Form to verify MSB status requirements.

- Is this business involved in any of the following:
 - Currency dealer of currency exchange of amounts over \$1,000 Yes No
 - Check cashing of amounts over \$1,000 Yes No
 - Issuer/Seller/Redeemer of Traveler's Checks, Money Orders or stored value of amounts over \$1,000 Yes No
 - Money transfer of any amount Yes No

Is any signer, owner or an immediate family member a senior official in a foreign government? Yes No

- Deluxe Detect completed on businesses and owners? Yes No
- Signature Cards Scanned? Yes No
- Owner's Driver's License Scanned? Yes No
- Online Banking set-up? Yes No
- Checks Ordered? Yes No
- Statements: Mail Estatements Pickup Waverly Pickup Montrose
- Debit/ATM Card ordered? Yes No

Risk Level assigned and placed in Insite? Low Medium High

Instructions on how to assign risk level:

If you have circled one or more High Risk Items, assign customer a high risk rating.

If you have circled two or more Medium Risk Items, assign a high risk rating.

If you have circled one Medium Risk Item, assign customer a medium risk rating.

Otherwise, assign customer a low risk rating.

INITIAL CUSTOMER RISK ASSESSMENT Circle all that apply.			
	LOW RISK ITEMS	MEDIUM RISK ITEMS	HIGH RISK ITEMS
Type of Business		Professional service providers (lawyers, accountants, investment brokers, title companies), private banking or trust services, and cash-intensive businesses such as (restaurants, convenience stores, liquor stores, retail stores including jewelry stores, parking garages, truck stops, etc.). Beneficial ownership accounts that are nonpersonal trusts and foundations.	Numerous foreign wires, deposit-brokers, money-service business (currency exchange, money transmitters, check cashing, money order sales, prepaid access issuer or seller, funds transfer service provider), jewelry wholesaler, travel agencies, pawnbrokers, real estate agencies, concentration accounts, auctioneers and casinos. Beneficial ownership accounts that are shell companies or private investment companies.
Documentary Verification	Satisfactory ID and verification of all applicants. Taxpayer ID number provided on all applicants	All applicants not present, but all information collected and verified based on the Bank's policies and procedures. Discrepancies identified and resolved.	One or more applicants did not provide TIN; or CIP discrepancies not resolved, but account opening approved. Customer refuses or is reluctant to provide requested document.
Citizenship	US Citizen	Applying for Citizenship	Non-US Citizen
Location of Customer	Local, MN	Non-local, US	Non-Local, Foreign address
Initial Deposit		Cash of \$3,000 or more	International wire
Other		Customer is curious about bank account opening procedures.	

Completed by _____ Branch _____ Verified By _____