



Time for a new bank? We think so too.

It's about time you made the switch to First Basin Credit Union. We are so happy to have you join the First Basin family, and we want to make the transition as easy as possible. The following documents and forms will help you open up your First Basin membership. Then, use the Switch Kit designed, specifically for you, to get your accounts in tip-top shape.

Here is everything you need.. and then some:

Page 1: Business Account Requirements per Entity

An easy checklist that should let each business entity type know which documents will be needed during account opening.

Pages 2 - 6: Business Account Application

The Legal Entity Application for Business application is the application for business membership at First Basin Credit Union. This applications covers basic business information, banking transactions anticipated, products anticipated, third party information if applicable, and more.

Once these have been completed, you will be one step closer to being finished.

This should be everything you need, and more, to make the switch to First Basin, but if you need assistance or are unsure of anything - we are always here to help.

You're going to like coming in first.





Business Account Requirements

Sole Proprietorship
Documents Required: DBA (Doing Business As) Certificate if reporting with individual Social Security Number EIN (Employer Identification Number) from IRS form SS-4 if one is assigned to entity name County Business License/Permit Confirmation Physical Address of Business - Verification State Issued ID for owner
Partnership
Documents Required: Must have an EIN (Employer Identification Number) Partnership agreement and/or Partnership Registration Physical Address of Business - Verification State Issued ID for all owners/partners
Note: Partners may be entities, so ownership and beneficial ownership has to be ascertained.
Documents Required: EIN Letter from IRS Form SS-4 (Employer Identification Number) Secretary of State Certificate of Filing Secretary of State Certificate of Formation LLC Operating Agreement Physical Address of Business - Verification State Issued ID for all owners, account signers, and beneficial owners
Corporation
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Documents Required: EIN Letter from IRS Form SS-4 (Employer Identification Number) Secretary of State Certificate of Filing Secretary of State Certificate of Formation Physical Address of Business - Verification State Issued ID for all owners, account signers, and beneficial owners Bylaws or Signed minutes



Legal Entity Application for Business Account

Please Check One: New Member Existing Member

PART 1		Info	ormation		
Name of Least Table					
3					
Mailing Address:					
	·				
•	-				
	3				
What counties does the	e business operat	e in?			
What states does the t	ousiness operate i	n?			
Does the business oper	ate outside of the	U.S.?			
Where are your custom	ers located?				
What is the purpose of	the account (Ope	rations, Pa	yroll, etc.)?		
Which bank is the mone	ey coming rrom?:				
Type of Legal Entity:	Corporation	LLC	Partnership	Sole Proprietorship	Non-Profit
	Agent	Other			
PART 2	Bank	ing trans	actions antic	ipated	
Cash		Wires		CreditCard	
Checks		International Wires		Remote Check Deposit	
				•	
Debit Card Transactions		Domesti		Other	
ACH Transactions		Online Banking			
PART 3	Тур	es of pro	ducts anticip	ated	
Checking		Online S	evices	Business Loan	
Savings		CD		Other	

PART 4	Specialized Business Types		
Is the customer a professional service provider?		YES	NO
Practicing Lav	w, practicing medicine	YES	NO
Accounting		YES	NO
Real-estate b	rokerage	YES	NO
Pawn Brokera	age .	YES	NO
Title insuranc	e and real estate closing	YES	NO
Other			
Is this account an IOLTA a	account?	YES	NO

Internet Gambling Questions

Does your company have any games or financial activities on its website?

YES

NO

Do you provide services to companies who provide internet gambling?

YES

NO

If YES to any of the above, STOP! Please refer to Compliance before opening account.

MSB Questions		
Does your company cash checks over \$1,000?	YES	NO
Does your company issue cashiers checks or money orders over \$1,000?	YES	NO
Does your company exchange currency over \$1,000?	YES	NO
Do you transmit currency even virtual currency at any dollar amount?	YES	NO
Do you provide/sell prepaid cards?	YES	NO

If YES to any of the above, STOP! First Basin Credit Union does not allow Money Service Businesses.

Privately Held ATM's (Complete when customer has an ATM on premises not owned by bank)

Does the business have any private ATM machines located on the premises?

YES

Does your business own or lease from another contractor? If so, we will need:

- Copy of the ATM agreement with sponsoring entity
- Exact Physical location(s) of the ATM(s)
- Copy of the state registration (if required by state)
- Copy of three (3) months ATM activity statements
- Description of currency servicing arrangements including:
 How is cash being replenished store proceeds? armored car? etc.

NO

Nongovernment Organizations (Charities, nonprofit, clubs, civic organizations, campaigns)

What is the purpose of your	nonprofit organization?		
Where do the donations com	ne from?		
Note: Some are required to	o register with the Secretary of State if so a copy of	the State Registi	ration.
	Third Party Payment Processors		
Does you process payments	s for another person or entity?	YES	NO
	st of your merchants. nticipated volume and types of transactions that you w s of your previous bank statements.	<i>i</i> ill engage in	
Does your third party payment processor lease space to other processors?		YES	NO
What is the volume?			
<u>.</u>	are processed?		
_	erchant?		
What types of instruments	are used for payments?		
ACH			
Remotely created ch	necks		
Other			
What geographic regions do	you cover?		
In county	In state		
In the U.S.	International		
How many merchants do yo	ou process for?		
Do you rent space on your se	erver to other payment processors?	YES	NO
Do you keep returns in a sep	YES	NO	
What percentage of returns	do non baye?		

PART 5

Documentation on Structure of the Business

Member will provide domestic documents for business which began in this state. Foreign documentation if from another state. Customers who meeet CIP documentation exemption are noted on exemption list. Obtain fictitious name when applicable. We require ID on all signers.

Documentary Verification:

- Sole Proprietorship: IRS Form SS-4, County Filing, DBA Certificate
- General Partnership: IRS Form SS-4, Partnership agreement/registration
- Limited Liability Company: IRS Form SS-4, Articles, Certificate of Formation
- Corporation: IRS Form SS-4, Articles, Certificate

Address (Residential or Business Street Address)

Non-Profit Organization: IRS Form SS-4, Bylaws/Minutes

PART 6 Documentation on Beneficial Owners (If Corporation, Partnership or LLC)

* See exemptions for documentation on business and exemptions for documentation on owners. Persons opening an account on behalf of legal entity must provide the following information: a. Name and title of person opening account: b. Name and type of "Legal Entity" for which the account is being opened: c. 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. **DO NOT PUT ENTITIES.** • If no individual meets this definition, please write "Non Applicable". Nonprofit Corporations do not have 25% owner section, only Part d on page 5. *If non US Person use Social Security Number, Passport Number or similar. 1. Date of Birth Copy of ID obtained Name Address (Residential or Business Street Address) *Social Security Number Copy of ID obtained 2. Date of Birth Name Copy of ID obtained

Copy of ID obtained

*Social Security Number

Documentation on Beneficial Owners (Continued)

Name	Date of Birth	Copy of ID obtained
Address (Residential or Business Street Address)	*Social Security Number	Copy of ID obtained
Name	Date of Birth	Copy of ID obtained
Address (Residential or Business Street Address)	*Social Security Number	Copy of ID obtained
 d. The following information for one individual with significated above, such as: An executive officer or senior manager (e.g., Chief Exchief Operating, Officer, Managing Member, General F Any other individual who regularly performs similar f 	ecutive Officer, Chief Financial Officer Partner, President, Vice President, Tre Functions.	; asurer); or
NOTE: If appropriate, an individual listed under sec		Copy of ID obtained
Address (Residential or Business Street Address)	*Social Security Number	Copy of ID obtained
Name	Date of Birth	Copy of ID obtained
Address (Residential or Business Street Address)	*Social Security Number	Copy of ID obtained
, certify, to the best of my knowledge, that the information	\ 1 1 3	, 3
Signature:	Date:	