



Client Information Profile – 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 a deposit or loan account. What this means for you: When you open an account, we will ask for your name, address, date of birth (for an individual), and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

A. ACCOUNT TITLE				

B. PRIMARY ACCOUNT OWNER				
Full Name*				
Date of Birth*		SSN/ITIN*		
Physical Address* (No P.O. Box Addresses)	Street Address	City	State	Zip Code
Mailing Address (if applicable)	Street Address	City	State	Zip Code
Email Address		Home Phone*		
Work Phone		Cell Phone		
Employer		Title / Occupation		
Mother's Maiden Name		Place of Birth		
Politically Exposed Person	<input type="checkbox"/> Yes <input type="checkbox"/> No	If PEP, list the Jurisdiction		
Personal Form of Identification* (e.g., driver's license, passport, state ID card, etc.)				
ID Number		Issued By		
ID Type		Issue Date	Expiration Date	

*Required field

C. ADDITIONAL ACCOUNT SIGNER(S)				
<input type="checkbox"/> Joint Owner <input type="checkbox"/> Executor <input type="checkbox"/> Fiduciary <input type="checkbox"/> Custodian <input type="checkbox"/> Guarantor <input type="checkbox"/> Authorized Signer <input type="checkbox"/> Guardian <input type="checkbox"/> Minor				
Full Name*				
Date of Birth*		SSN/ITIN*		
Physical Address* (No P.O. Box Addresses)	Street Address	City	State	Zip Code
Email Address		Home Phone*		
Work Phone		Cell Phone		
Employer		Title / Occupation		
Mother's Maiden Name		Place of Birth		
Politically Exposed Person	<input type="checkbox"/> Yes <input type="checkbox"/> No	If PEP, list the Jurisdiction		

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Personal Form of Identification*
(e.g., driver's license, passport, state ID card, etc.)

ID Number		Issued By	
ID Type		Issue Date	Expiration Date

Joint Owner
 Executor
 Fiduciary
 Custodian
 Guarantor
 Authorized Signer
 Guardian
 Minor

Full Name*				
Date of Birth*		SSN/ITIN*		
Physical Address* (No P.O. Box Addresses)	Street Address	City	State	Zip Code
Email Address		Home Phone*		
Work Phone		Cell Phone		
Employer		Title / Occupation		
Mother's Maiden Name		Place of Birth		
Politically Exposed Person	<input type="checkbox"/> Yes <input type="checkbox"/> No	If PEP, list the Jurisdiction		

Personal Form of Identification*
(e.g., driver's license, passport, state ID card, etc.)

ID Number		Issued By	
ID Type		Issue Date	Expiration Date

Joint Owner
 Executor
 Fiduciary
 Custodian
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Full Name*				
Date of Birth*		SSN/ITIN*		
Physical Address* (No P.O. Box Addresses)	Street Address	City	State	Zip Code
Email Address		Home Phone*		
Work Phone		Cell Phone		
Employer		Title / Occupation		
Mother's Maiden Name		Place of Birth		
Politically Exposed Person	<input type="checkbox"/> Yes <input type="checkbox"/> No	If PEP, list the Jurisdiction		

Personal Form of Identification*
(e.g., driver's license, passport, state ID card, etc.)

ID Number		Issued By	
ID Type		Issue Date	Expiration Date

*Required field

D. BENEFICIARY				
(as desired)				
Full Name*		SSN/ITIN		
Date of Birth*		Home Phone		
Physical Address	Street Address	City	State	Zip Code
Full Name*		SSN/ITIN		
Date of Birth*		Home Phone		
Physical Address	Street Address	City	State	Zip Code
Full Name*		SSN/ITIN		
Date of Birth*		Home Phone		
Physical Address	Street Address	City	State	Zip Code

*Required field

E. CLIENT CERTIFICATION	
By signing this form, I hereby confirm, to the best of my knowledge, that the information provided above is complete and accurate.	
Name:	
Signature:	Date:

BANK USE ONLY			
CIP Verified By (initials and date):	Qualifile Pass (initials and date):	ID Verify/OFAC Verified By (initials and date):	
Data Input By (name):	New Account Called Back Performed By (name & date):		
AML Risk Rating	<input type="checkbox"/> Low	<input type="checkbox"/> Medium	<input type="checkbox"/> High
Notes explaining why this Risk Rating was chosen:			