**FIRST NATIONAL BANK**
**BUSINESS CUSTOMER IDENTIFICATION PROGAM**

IMPORTANT ACCOUNT OPENING INFORMATION: Federal law requires us to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances, we may use outside sources to confirm this information. The information that you provide is protected by our privacy policy and federal law.

Business Name: _____

Mailing Address: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Tax ID Number or EIN: _____

Contact Phone Number(s): _____

E-Mail Address: _____

Nature of Business: _____

Purpose of Account: _____

Initial Deposit: _____ Expected Cash Activity In/Out: _____

Expected Wire Transfer Activity: _____ ☐ Initiate / ☐ Receive ☐ Domestic / ☐ Foreign

Expected ACH Transaction Activity: _____

For Business Accounts Only: Will your business be engaging in marijuana and/or hemp related activity, which includes CBD oil? Yes / No ☐ ☐

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Who will be authorized on this account? What is their role or title with the Business?

_____

_____

_____

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Trusted Contact: Please provide name, phone number & address.
Someone we may contact if we are unable to get ahold of you. They will **not** have access to your accounts or account information.

_____

_____

_____

**OFFICE USE ONLY:**

Account Opened By: _____

Date: _____ Account Type: _____ Account Number: _____

## IDENTIFICATION

### FOR THE ENTITY:

__ Operating Agreement

__ Articles of Organization

__ EIN/Tax ID

### FOR INDIVIDUALS:

Needed all authorized signers and Beneficial Owners

Primary (check one)

__ Driver's License

__ State ID Card

__ Military ID Card

__ Passport

__ US Alien Registration Card

Secondary (check two)

__ Social Security Card

__ Birth Certificate

__ Student ID

__ Credit Card

__ Insurance Card

__ Organizational Membership Card

__ Property Tax Bill

__ Credit Report

***If a primary ID is not available, then two forms of secondary ID must be obtained for verification.

Discrepancy/Explanation:

OFAC(s) performed:

For the Entity: _____ For Individuals: ____