



Account # _____ Savings Checking

BUSINESS ACCOUNT APPLICATION

You must be a member to open a business account. All owners must sign. Based on the type of business account, required documentation includes a certified copy of resolution, certificate of good standing and one of the following: DBA, Articles of Incorporation, Partnership Agreement, Articles of Organization (LLC) and an operating agreement (LLC), if applicable.

SECTION A APPLICANT BUSINESS

Company Name		Telephone Number
Company Address		
Mailing Address		
Business Tax ID or SSN if DBA		If SSN, to which signer does it belong?
Email Address		State of Business
Date Business Established	Nature of Business	
Business Organized as: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Non-profit Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation		

SECTION B AUTHORIZED SIGNERS

Name		Contact Phone Number
SSN	Driver's License Number and State	Date of Birth
Address		

Name		Contact Phone Number
SSN	Driver's License Number and State	Date of Birth
Address		

Attach separate sheet for additional signers.

SECTION C T.I.N. CERTIFICATION AND BACKUP WITHHOLDING INFORMATION

Under penalties of perjury, the undersigned certifies that (1) the Taxpayer Identification Number (T.I.N.) shown on this form is the correct T.I.N. of the business of other entity applying for membership and services (or the entity is waiting for a T.I.N. to be issued to it); and (2) the entity is not subject to backup withholding because: (a) it is exempt from backup withholding, or (b) it has not been notified by the Internal Revenue Service (IRS) that it is subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified the business that it is no longer subject to backup withholding, and (3) the entity is a U.S. person.

Signature	Title	Date

Signature	Title	Date



Account # _____ Savings Checking

SECTION D

MEMBERSHIP AND ACCOUNT AGREEMENT

By signing below, I/We hereby apply for member of the above-named business/organization in the MariSol Federal Credit Union. The above-named business/organization agrees to the terms and conditions of the MariSol Federal Credit Union Business Account Agreement, receipt of which is acknowledged, said Agreement and any future amendments being incorporated by reference herein. The above-named business/organization further agrees to abide by the Bylaws of the Credit Union, and any amendments thereto. The above-named business/organization acknowledges receiving a copy of the terms and conditions applicable to each account or service that are being opened concurrently with this application and agrees to be bound by those terms. The above-named business/organization further understands and agrees that it will be bound by the terms and conditions of any other deposit account or service that it may later open. Any sole proprietorship account opened listing more than one individual as an owner shall be a joint account with rights of survivorship. The individual signing below acknowledges that they have the legal authority to bind the above-named business or other entity to this Agreement and authorize the Credit Union to verify or obtain further information as it may deem necessary concerning the entity or the individuals, including through the use of reports obtained from consumer reporting agencies. The undersigned agree that they shall be personally liable and hereby personally guaranty all obligations that the business/organization may incur as a result of its membership in the Credit Union. The undersigned further acknowledge that the provision of all financial services to the business or other entity by the Credit Union is subject to qualification and approval.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING AN 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 ask for your driver's license and other identifying documents.

Signature	Title	Date

Signature	Title	Date

SECTION E	DESIGNATION OR CHANGE OF BENEFICIARY (FOR SOLE PROPRIETORSHIP ONLY)
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If this account is opened for sole proprietorship, upon the death of the owner, if there is more than one, the funds covered by this agreement shall become the property of the beneficiary(ies) listed below who are alive at that time. Each beneficiary shall have the power to withdraw their share of the remaining balance. No beneficiary shall have any right under any circumstances to change the terms and conditions of this agreement.

Beneficiary Name: _____ **% of benefit** _____

Address (Street, City, Zip, Phone #) _____

Email Address: _____

Beneficiary Name: _____ **% of benefit** _____

Address (Street, City, Zip, Phone #) _____

Email Address: _____

Beneficiary Name: _____ **% of benefit** _____

Address (Street, City, Zip, Phone #) _____

Email Address: _____



CERTIFICATION OF BENEFICIAL OWNER(S)

Persons opening an account on behalf of a legal entity must provide the following information:

a. Name and Title of Natural Person Opening Account:

b. Name, Type, and Address 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:

Name	Date of Birth	Address (Residential or Business Street Address)	For U.S. Persons: Social Security Number	For Non-U.S. Persons: Social Security Number, Passport Number and Country of Issuance, or other similar identification number. *

(If no individual meets this definition, please write "Not Applicable.")

*In lieu of a passport number, Non-U.S. Persons may also provide a Social Security Number, an alien identification card number, or number and country of issuance of any other government-



issued document evidencing nationality or residence and bearing a photograph or similar safeguard.

d. *The following information for one individual with significant responsibility for managing the legal entity listed above, such as:*

- An executive officer or senior manager (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer); or*
- Any other individual who regularly performs similar functions.*

(If appropriate, an individual listed under section (c) above may also be listed in this section (d)).

Name/Title	Date of Birth	Address (Residential or Business Street Address)	For U.S. Persons: Social Security Number	For Non-U.S. Persons: Social Security Number, Passport Number and Country of Issuance, or other similar identification number. *

I, _____ (name of natural person opening account), hereby certify, to the best of my knowledge, that the information provided above is complete and correct.

Signature: _____ Date: _____

Legal Entity Identifier _____ (Optional)



Date _____

Business Name _____

Account Number _____

RESOLUTION

The above named business or other legal entity ("business") has applied for membership in the **MariSol Federal Credit Union**. The undersigned acknowledges that the following is a true representation of resolutions duly adopted by the Board of Directors/Members/ Partners, Governing Body at a meeting, as further described below:

RESOLVED, that this business is hereby authorized to apply for member and to deposit funds into accounts in the MariSol Federal Credit Union, and agrees to be bound by the terms and conditions of any such account opened with the credit union.

FURTHER RESOLVED, that until further written notice, said credit union shall be authorized to pay withdrawals as requested, by draft or otherwise, by any of the persons whose names and titles appear as authorized signers.

FURTHER RESOLVED, that said credit union is authorized to accept a pledge of all or any part of said account as security for any obligation owed to it by this business, which shall be executed by any of the same authorized signers.

FURTHER RESOLVED, that every authorization previously granted to the credit union with respect to the accounts owned by the business entity is revoked and rescinded. However, the authority given is retroactive, and any acts referred to which were performed by an authorized signer(s) prior to the adoption of these resolutions are ratified and confirmed. Further that every authorization granted to the credit union with respect to this account shall remain in full force and effect until the credit union is provided with a new appropriately authorized Business Account Application/Resolution.

FURTHER RESOLVED, that the signature(s) set opposite the respective titles above are genuine and that the person(s) whose signature(s) appear on the authorization were incumbents of the office/positions of the business set opposite their respective signature(s) on the date indicated.

FURTHER RESOLVED, that the above resolutions do not conflict with or contravene the creation or governing documents of the business.

Check and sign the correct certification for the business type – see Certification Attachments.



Certification of Partnership

We hereby certify that We are all of the partners of the above named Partnership, that the foregoing is a complete, true and correct representation of resolutions duly adopted by the partners of the Partnership at a meeting held on _____, at which the appropriate number of partners voted in favor of said resolutions, and that the resolutions are recorded in the minutes of the Partnership, if any, and are not in full force and effect.

Partner Signature _____ Date _____

Partner Signature _____ Date _____

Partner Signature _____ Date _____

Certification of Limited Partnership

We hereby certify that we are all of the partners of the above named Limited Partnership, that the foregoing is a complete, true and correct representation of resolutions duly adopted by the partners of the Limited Partnership at a meeting held on _____, at which the appropriate number of partners voted in favor of said resolutions, that the resolutions are recorded in the minutes of the Partnership, if any, and are not in full force and effect and that _____ and _____ is/are the only General Partner(s) of the Limited Partnership.

General Partner Signature _____ Date _____

General Partner Signature _____ Date _____

Partner Signature _____ Date _____

Partner Signature _____ Date _____

Partner Signature _____ Date _____



Certification of Limited Liability Company or Professional Limited Liability Company

I/We hereby certify that I/We are all of the duly appointed Member(s)/Manager(s) of the above referenced Limited Liability Company (LLC)/Professional Limited Liability Company (PLLC), that the foregoing is a complete, true and correct representation of resolutions duly adopted by Member(s)/Manager(s) of the LLC/PLLC at a meeting held on _____, at which the appropriate voting representation voted in favor of said resolutions, and that the resolutions are recorded in the minutes of the LLC/PLLC are now in full force and effect.

(check if applicable) ____ I/We further certify that this LLC/PLLC has not adopted an Operating Agreement, and, to the extent any future Operating Agreement adopted conflicts with any agreements between MariSol Federal Credit Union and the LLC/PLLC, the agreements between MariSol Federal Credit Union and the LLC/PLLC will control.

Member/Manager Signature _____

Date _____

Member/Manager Signature _____

Date _____

Member/Manager Signature _____

Date _____



Certification of Corporation

I hereby certify that I am the duly elected and qualified Secretary of the above-named corporation, that the foregoing is a complete, true and correct representation of resolutions adopted by the Board of Directors of the corporation at a meeting held on _____, at which a quorum was present a voted in favor of said resolutions, and that the resolutions are recorded in the minutes of the corporation and are now in full force and effect.

Secretary Signature _____

Date _____

If the secretary is not designated to sign or act alone on this account, this Certification of Corporation must be further signed below by an additional director or officer of the corporation, unless there are no other individuals who are directors or officers, in which case the statement below must be completed.

Director/Officer Signature _____

Date _____



Unlawful Internet Gambling Enforcement Act (UIGEA) of 2006

The UIGEA prohibits gambling businesses from knowingly accepting payments in connection with unlawful internet gambling, including payments made through credit cards, electronic fund transfers, and checks.

Regulation GG

The Department of Treasury and the Federal Reserve Board have issued a joint final rule, *Regulation GG*, to implement the UIGEA. Mandatory compliance is effective December 1st, 2009.

As defined in *Regulation GG*, **unlawful internet gambling** means to place, receive, or otherwise knowingly transmit a bet or wager by any means which involves the use, at least in part, of the internet where such bet or wager is unlawful under any applicable Federal or State law in the State or Tribal lands in which the bet or wager is initiated, received, or otherwise made. **Commercial customer** means a person that is not a consumer, and that contract with a non-exempt participant in a designated payment system to receive, or otherwise accesses, payment transaction services through that non-exempt participant.

Restricted transaction means any of the following transactions or transmittals involving any credit, funds, instrument, or proceeds that the act prohibits. Any person engages in the business of betting or wagering (which does not include the activities of a financial transaction provider, or any interactive computer service or telecommunications service) from knowingly accepting, in connection with the participation of another person in unlawful Internet gambling—

1. Credit, or the proceeds of credit, extended to or on behalf of such other person (including credit extended through the use of a credit card)
2. An electronic fund transfer, or funds transmitted by or through a money transmitting business, or the proceeds of an electronic fund transfer or money transmitting service, from or on behalf of such other person
3. Any check, draft, or similar instrument that is drawn by or on behalf of such other person and is drawn on or payable at or through any financial institution.

As a member of MariSol Federal Credit Union, these restricted transactions are prohibited from being processed through your account of banking relationship with us. If you do engage in an Internet gambling business and open a new account with us, you will be required to provide evidence of your legal capacity to do so.

My business does not engage in unlawful Internet gambling.

Member Signature	Date	Member Signature	Date
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Type of Business	Example Name of Business	Acceptable Documentation	CIP Information Requirement	CIP ID requirements – two forms of ID
Sole Proprietorship	Jane Doe DBA Jane's Crafts and Things (1 Owner – in Arizona a husband and wife can operate a Sole Proprietorship)	State Business License OR EIN Identifying Business and Owner Resolution and Signature card	Name, Address, Date of birth, social security number on business owner	<ul style="list-style-type: none"> • Drivers License • Passport • Military ID • Arizona I.D. • Any other Federally or State issued ID with a picture • Social Security Card • Birth Certificate
Partnerships	Smith and Smith (ALL PARTNERS MUST BE SIGNERS ON THE ACCOUNT; NO EXCEPTIONS)	Statement of Partnership Authority (if filed with Secretary of State) , and/or Partnership Agreement Resolution and Signature card	Name, Address, EIN on Business And Name, Address, Date of birth, social security number on each partner/business owner Beneficial Ownership(s) Form	<ul style="list-style-type: none"> • Drivers License • Passport • Military ID • Arizona I.D. • Any other Federally or State issued ID with a picture • Social Security Card • Birth Certificate
Limited Partnership	Smith and Smith, LTD General Partners/Limited Partners	Statement of Partnership Authority (If filed with Secretary of State) and/or Certificate of Limited Partnership (stamped filed by Secretary of state) Partnership Agreement Resolution and Signature card	Name, Address, EIN on Business And Name, Address, Date of birth, social security number on each owner/signer Beneficial Ownership(s) Form	<ul style="list-style-type: none"> • Drivers License • Passport • Military ID • Arizona I.D. • Any other Federally or State issued ID with a picture • Social Security Card • Birth Certificate
Corporations	Smith, Incorporated Corporation owns – Secretary must sign the account resolution	Articles of Incorporation (filed with the Arizona Corporation Commission) Identification of Corporate Secretary (Minutes) Resolution and Signature card	Name, Address, EIN on Business/Corporation And Name, Address, Date of birth, social security number on each owner/signer Beneficial Ownership(s) Form	<ul style="list-style-type: none"> • Drivers License • Passport • Military ID • Arizona I.D. • Any other Federally or State issued ID with a picture • Social Security Card • Birth Certificate

Type of Business	Example Name of Business	Acceptable Documentation	CIP Information Requirement	CIP ID requirements – two forms of ID
LLC	<p>Smith & Smith, LLC</p> <p>Can be owned by an individual or a corporation or a mixture of both.</p> <p>If the LLC is a member LLC , then each of the members can transact business.</p> <p>If it is a managed LLC, then there will be a party who is named as the manager that can transact business.</p>	<p>Identification of Managing member, if any.</p> <p>Articles of Organization for the Limited Liability company (filed with the Arizona Corporation Commission)</p> <p>Operating Agreement</p> <p>Resolution & Signature Card</p>	<p>Name, Address, EIN on Business/LLC and Name, Address, Date of birth, social security number on each owner/signer/managing member Beneficial Ownership(s) Form</p>	<ul style="list-style-type: none"> • Drivers License • Passport • Military ID • Arizona I.D. • Any other Federally or State issued ID with a picture • Social Security Card • Birth Certificate
Non-Profit Organization	<p>Boy Scout Troop #334</p> <p>Organization Owns</p> <p>By-Laws tell who has authority to open account</p>	<p>Identification</p> <p>By-Laws</p> <p>Resolution & Signature Card</p>	<p>Name, Address, and EIN on Non-Profit and Name, Address, Date of birth, social security number on each signer Beneficial Ownership(s) Form</p>	<ul style="list-style-type: none"> • Drivers License • Passport • Military ID • Arizona I.D. • Any other Federally or State issued ID with a picture • Social Security Card • Birth Certificate