Everest FEDERAL CREDIT UNION

Business Membership Application

Member Number:

Business Account Authorization

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 the information. The information you provide is protected by our privacy policy and federal law.

BUSINESS INFORMATION

NAME OF ORGANIZATION	OTHER TRADE OR DBA NAME(S)

☐ C Corporation ☐ Limited Liability Company (LLC) ☐ General Partnership ☐ Club/Group (Unincorporated)
☐ S Corporation ☐ Regarded ☐ Disregarded ☐ Limited Partnership (LP) ☐ Non-Profit Corporation
☐ Professional Corporation ☐ Sole Proprietorship ☐ Limited Liability Partnership (LLP)

I/We hereby apply for the following accounts:	Accounts Services:
☐ Savings (required) ☐ Checking ☐ Everest Heritage Savings	☐ Debit Card ☐ Online Banking

STATE REGISTERED:	EIN/TIN:	

BUSINESS LICENSE NUMBER:	ISSUANCE DATE:	EXPIRATION DATE (IF ANY)	STATE ISSUED:

MAILING ADDRESS:

Unit/Apt./Suite#:	CITY:	STATE:	ZIP CODE:

BUSINESS PHONE	OTHER PHONE	EMAIL

MEMBERSHIP ELIGIBILITY / CURRENT MEMBER ACCOUNT	NATURE OF BUSINESS

PRINCIPALS OR OWNERS OF THE BUSINESS ENTITY, INCLUDING ANY BENEFICIAL OWNERS

- Beneficial Owners are any individuals (natural persons) owning 25% or more of the equity interest in this legal entity and any individuals (natural persons) with significant responsibility to control this legal entity.
- Include each of the individual(s) who, directly or indirectly, through any contract, arrangement, understanding, relationship, intermediary, tiered entity, or otherwise, owns 25% or more of the equity interest in this legal entity.
- Include each of the individual(s) with significant responsibility to control this legal entity (CEO, CFO, managing partner, etc.).

FIRST NAME	LAST NAME	BIRTH DATE	SSN

TYPE OF IDENTIFICATION ( ) State DL ( ) US Passport ( ) Foreign Passport	IDENTIFICIATION LICENCE NUMBER	ISSUANCE DATE	EXPIRATION DATE	STATE ISSUED

STREET ADDRESS	CITY	STATE	ZIP CODE

OWNERSHIP SHARE %	TITLE	BENEFICIAL OWNER TYPE ( ) None ( ) Owner ( ) Control ( ) Owner & Control ( ) Information Only

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BUSINESS MEMBERSHIP APPLICATION
37-51, 75TH STREET
NEW YORK NY 11372

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TAXPAYER IDENTIFICATION AND BACKUP WITHHOLDING

Under penalties of perjury, the undersigned certifies on behalf of the Account Owner that:

(1) The number shown on this form is the Account Owner's correct taxpayer identification number (or the Account Owner is waiting for a number to be issued), and

(2) The Account Owner 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 Account Owner that it is no longer subject to backup Withholding, and

(3) The Account Owner is a U.S. citizen or other U.S. person. For federal tax purposes, the Account Owner is considered a U.S. person if the Account Owner is: an individual who is a U.S. citizen or U.S. resident alien; a partnership, corporation, company, or association created or organized in the United States or under the laws of the United States; an estate (other than a foreign estate); or a domestic trust (as defined in Regulations section 301.7701-7).

(4) The FATCA code(s) entered on this form (if any) indicating that the Account Owner is exempt from FATCA reporting is correct.

Certification Instructions. Cross out item **2** above if the Account Owner has been notified by the IRS that it is currently subject to backup Withholding because it has failed to report all interest or dividends on its tax return. Complete the appropriate W-8 form if the Account Owner is not a U.S. person. If a W-8 BEN is completed, your signature does not serve to certify this section.

WHEREAS on this_____day of_____, it has been determined, that it is in the best interest of Business/Organization to establish a membership in and depository relationship with the **EVEREST FEDERAL CREDIT UNION.**

NOW, THEREFORE, BE IT RESOLVED AND AGREED, that the Credit Union is hereby designated as a depository of funds belonging to the Business/Organization.

BE IT FURTHER RESOLVED AND AGREED, that the person(s) designated below is (are) designated as an Authorized Person to establish a depository relationship with the Credit Union and is (are) authorized to from time to time open one or more share or deposit account(s) of any type. It is distinctly agreed and understood that the designated Authorized Person(s) is (are) vested with all power and authority described for an Authorized Person in the Business Membership and Account Agreement.

BE IT FURTHER RESOLVED AND AGREED, that the Credit Union will be notified promptly in writing of any change of the Authorized Person(s) identified below, or any change in the ownership, legal structure, or management of the business/organization and upon any dissolution or bankruptcy or the Business/Organization.

BE IT FURTHER RESOLVED AND AGREED, that the Credit Union may rely on any actual or facsimile signature that reasonably resembles the facsimile or specimen signature of an Authorized Person provided below, in the exercise of any powers granted by the Business Membership and Account Agreement until notified in writing of a change; that the Credit Union shall not be held liable for refusing to honor any signature where the Business/Organization has not provided to the Credit Union a specimen thereof; that the Business/Organization holds the Credit Union harmless form and agrees to indemnify the Credit Union for all claims, demands, losses, costs, damages or expenses including reasonable attorney fees suffered or incurred by the Credit Union resulting from payments and disbursements made or any other actions that Credit Union takes in good faith in reliance on the actual or facsimile signatures of an Authorized Person, provided that when a signature is required to exercise the authority described in the Business Membership Account Agreement and the signature of at least one Authorized Person must appear on the appropriate document.

By signing below the undersigned agree to the by-laws of this Credit Union and applicable account terms and conditions, as amended from time to time; to pay any membership or entrance fee; and authorized the Credit Union to verify credit and employment history by any necessary means, including preparation of a credit report by a credit reporting agency on the undersigned, as individuals. The undersigned certify that the information provided on this agreement is true and correct and that the terms on this agreement apply to all listed accounts. The undersigned acknowledge receipt of a copy of the terms and conditions applicable to this Business Account Card, The Business Membership and Account Agreement, the Funds Availability Policy disclosure and additional documents and disclosures the Credit Union has provided. **The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

1.1.1 X

SIGNATURE PRINTED NAME: DATE

1.1.2 X

SIGNATURE PRINTED NAME: DATE

1.1.3 X

SIGNATURE PRINTED NAME: DATE

1.1.4 X

SIGNATURE PRINTED NAME: DATE

1.1.5 X

SIGNATURE PRINTED NAME: DATE

1.1.6 X

SIGNATURE PRINTED NAME: DATE

1.1.7 X

SIGNATURE PRINTED NAME: DATE

1.1.8 X

SIGNATURE PRINTED NAME: DATE

1.1.9 X

SIGNATURE PRINTED NAME: DATE

FOR CREDIT UNION USE ONLY

DATE	BRANCH NAME	EMPLOYEE	MEMBERSHIP ELIGIBILITY VERIFIED

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CORPORATE AUTHORIZATION RESOLUTION

By:

Referred to in this document as "Financial Institution: Referred to in this document as "Corporation"

I, _____, certify that I am Secretary (clerk) of the above named corporation organized under the laws of _____, Federal Employer I.D. Number _____, engaged in business under the trade name of _____, and that the resolutions on this document are a correct copy of the resolutions adopted at a meeting of the Board of Directors of the Corporation duly and properly called and held on _____ (date).
These resolutions appear in the minutes of this meeting and have not been rescinded or modified.
AGENTS Any Agent listed below, is authorized to exercise the powers granted as indicated below:

Name and Title or Position	Signature
A. _____	x _____
B. _____	x _____
C. _____	x _____
D. _____	x _____
E. _____	x _____
F. _____	x _____

POWERS GRANTED: All above persons will have the Power to:

(1) Exercise all of the powers listed in the Business Membership and Account Agreement.

(2) Open and close any deposit or share account(s) in the name of the Corporation.

(3) Endorse checks and orders for the payment of money or otherwise withdraw or transfer funds on deposit with this Financial Institution.

(4) Borrow money on behalf and in the name of the Corporation, sign, execute and deliver promissory notes or other evidences of indebtedness. Authorized signers can only execute a promissory note in conjunction with a joint owner.

(5) Endorse, assign, transfer, mortgage or pledge property now owned or hereafter owned or acquired by the Corporation as security for sums borrowed, and unconditionally guarantee payment.

LIMITATIONS ON POWERS The following are the Corporation's express limitations on the powers granted under this resolution.

RESOLUTIONS

The Corporation named on this resolution resolves that,

(1) The Financial Institution is designated as a depository for the funds of the corporation and to provide other financial accommodations indicated in this resolution.

(2) This resolution shall continue to have effect until express written notice of its rescission or modification has been received and recorded by the Financial Institution. Any and all prior resolutions adopted by the Board of Directors of the Corporation and certified to the Financial Institution as governing the operation of this

corporation's accounts(s), are in full force and effect, until the Financial Institution receives and acknowledges as express written notice of its revocation, modification or replacement. Any revocation, modification or replacement of a resolution must be accompanied by documentation, satisfactory to the Financial Institution, establishing the authority for the changes.

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(3) The signature of an Agent on this resolution is conclusive evidence of their authority to act on behalf of the Corporation. Any Agent, so long as they act in a representative capacity as an Agent of the Corporation, is authorized to make any and all other contracts, agreements, stipulations and orders which they may deem advisable for the effective exercise of the powers indicated on page one, from time to time with the Financial Institution, subject to any restrictions on this resolution or otherwise agreed to in writing.

(4) All transactions, if any, with respect to any deposits, withdrawals or on behalf of the Corporation with the Financial Institution prior to the adoption of this resolution are hereby ratified, approved and confirmed.

(5) The Corporation agrees to the terms and conditions of any account agreement, properly opened by an Agent of the Corporation. The Corporation authorizes the Financial Institution, at any time, to charge the Corporation for all checks, drafts, or other orders, for the payment of money, that are drawn on the Financial Institution, so long as they contain the required number of signature for this purpose.

(6) The Corporation acknowledges and agrees that the Financial Institution may furnish at its discretion automated access devices to Agents of the Corporation to facilitate those powers authorized by this resolution or other resolutions in effect at the time of issuance. The term "automated access device" includes, but is not limited to, automated teller machines (ATM), and debit cards.

(7) The Corporation acknowledges and agrees that the Financial Institution may rely on alternative signature and verification codes issued to or obtained from the Agent named on this resolution. The term "alternative signature and verification codes" includes, but is not limited to, facsimile signatures on file with the Financial Institution, personal identification numbers (PIN), and digital signatures. If a facsimile signature specimen has been provided on this resolution, (or that are filed separately by the Corporation with the Financial Institution from time to time) the Financial Institution is authorized to treat the facsimile signature as the signature of the Agent(s) regardless of by whom or by what means the facsimile signature may have been affixed so long as it resembles the facsimile signature specimen on file. The Corporation authorizes each Agent to have custody of the Corporation's private key used to create a digital signature and to request issuance of a certificate listing the corresponding public key. The Financial Institution shall have no responsibility or liability for unauthorized use of alternative signature and verification codes unless otherwise agreed in writing.

EFFECTIVE ON PREVIOUS RESOLUTIONS This resolution supersedes resolution-dated _____. If not completed, previous resolutions remain in effect.

CERTIFICATE OF AUTHORITY
I further certify that the Board of Directors of the Corporation has, and at the time of adoption of this resolution had, full power and lawful authority to adopt the resolutions and to confer the powers granted above to the persons named who have full power and lawful authority to exercise the same. (Apply seal below where appropriate.)

____ If checked, the Corporation is a non-profit corporation.

In Witness Whereof, I have subscribed my name to this document and affixed, the seal of the Corporation

on
_____ (date).

_____ _____
Attest by One Other Officer Secretary

FOR FINANCIAL INSTITUTION USE ONLY

Acknowledge and received on _____ (date) by _____ (initials)

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