



Business Member Data Collection Sheet:

Date: _____

Member's Business Account:		Share (saving account)	Draft (checking account)	EIN
		Other: _____		
Business Name				
Street Address #1				
Street Address #2				
City	State	Zip Code	Request a Printed Statement?	
Alternate Address			Create an E-statement?	
Pick One:	C corporation	S Corporation	Partnership	LLC
	DBA Sole	Not for profit	Other	
Business Start date		Business Activities		
Additional Account Information				
1st Owner Information:				
Name			Gender	
Title	% of Ownership	Email:		
Business Phone	Cell Phone	Home Phone		
Driver License/State ID #	Social Security#			
Owner Affiliation to Credit Union:	None	CU Management	CU Employee	Board Member
	Board Member Relative	Supervisory Committee	Board Committee	
	CU Employee Relative	Committee Relative		
Member's Household of _____			Membership Number _____	
Additional Information:				

Requirements:

- 1) Owner's valid government ID
- 2) Business proof of address.
- 3) IRS EIN letter
- 4) NTT filling receipt (from DOS/SOS)
- 5) Minutes of signatory authority

Eligible to become Everest Federal Credit Union (EFCU) Member.

- 1) Is Owner member of EFCU?
- || 2) Languages Spoken _____
- 3) My /Our business is eligible to become a member of Everest Federal Credit Union.

USA PATRIOT ACT

In accordance with the USA PATRIOT ACT, Federal law requires all financial institutions to obtain, verify, and record information that identifies each individual or entity opening an account. This includes all personal and commercial accounts including loan and deposit accounts, as well as trust, brokerage, insurance, and investment management accounts.

What This Means To Our Members

When you open an account, you will be asked for your name, address, social security or tax identification number, date of birth (for individuals) and other information that will allow Everest Federal Credit Union to identify you. You will also be asked to furnish your driver's license or other identifying

FOR CREDIT UNION USE ONLY:		Member#:
Date of Membership	CU Membership Approved By:	Member ID Verified by: _____
_____	_____	[] OFAC
		[] Credit Report

Please read and sign on back side of this form! (second page)



Ownership information for multiple owners (if any)

2nd Owner Information:		SSN	
Name		Gender	
Title	% of Ownership	Email	
Business Phone	Cell Phone	Home Phone	
Password for account	Driver License #	OFAC Verified	
Owner Affiliation to Credit Union: None CU Management CU Employee Board Member Board Committee CU Employee Relative Board Member Relative Supervisory Committee Committee Relative Member's Household of _____ Membership Number _____			
Additional information		SSN	
3rd Owner Information:			
Name		Gender	
Title	% of Ownership	Email	
Business Phone	Cell Phone	Home Phone	
Password for account	Driver License #	OFAC Verified	
Owner Affiliation to Credit Union: None CU Management CU Employee Board Member Board Committee CU Employee Relative Board Member Relative Supervisory Committee Committee Relative Member's Household of _____ Membership Number _____			

By signing this agreement, the applicant (s) certify eligibility for membership in Everest Federal Credit Union, all information is complete and accurate, and submitted for the purpose of opening an account at Everest Federal Credit Union. I (we) also certify that:

1. The Social Security Number or Taxpayer Identification Number provided in this application is my/our correct Social Security Number or Taxpayer Identification Number (or I (we) am/are waiting for a number to be issued to me/us).
2. I (we) am/are not subject to backup withholding because: **a)** I (we) am/are exempt from backup withholding, or **b)** I (we) have not been notified by the Internal Revenue Service that I (we) am/are subject to backup withholding as a result of a failure to report all interest or dividends, or **c)** the Internal Revenue Service has notified me that I am no longer subject to backup withholding.
3. I (we) am/are a U.S. person or a U.S. resident alien.*

***If you are not a U.S. Citizen or other U.S. Person including a U.S. Resident Alien, check here to designate your denial of Form W-9 Certification and to request IRS form W-8BEN, which must be completed with unexpired ITIN and returned to Everest Federal Credit Union.**

I (we) agree to terms to maintain at least one share (\$25.00). I (we) also confirm that I (we) have received a copy of the Membership Agreement, and I (we) agree to act in accordance with the credit union's Bylaws and Policies.

1st Owner Signature Date

1st Owner Signature Date

2nd Owner Signature Date

2nd Owner Signature Date

3rd Owner Signature Date

3rd Owner Signature Date