

**NEW ACCOUNT APPLICATION  
BUSINESS**

Free Checking \_\_\_\_\_ Now \_\_\_\_\_ Restricted Now \_\_\_\_\_  
Savings \_\_\_\_\_ Certificates of Deposit \_\_\_\_\_

Sole Proprietor \_\_\_\_\_ Small Organization/Club \_\_\_\_\_ Non-Profit \_\_\_\_\_ Corporation \_\_\_\_\_  
Limited Liability Corp. \_\_\_\_\_ Partnership \_\_\_\_\_ Joint Venture \_\_\_\_\_ Other \_\_\_\_\_

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**Business Information**

Name \_\_\_\_\_ Tax Identification # \_\_\_\_\_  
Physical Address \_\_\_\_\_ Business Phone # \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Business Fax Phone # \_\_\_\_\_  
Mailing Address \_\_\_\_\_ Cell Phone # \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Filing State \_\_\_\_\_ Last Filing Date \_\_\_\_\_ Date Established \_\_\_\_\_  
Nature of Business \_\_\_\_\_ Primary County \_\_\_\_\_  
E-Mail Address \_\_\_\_\_ Facsimile Authorization Yes \_\_\_\_\_ or No \_\_\_\_\_  
Name of Business Owner/Primary Contact \_\_\_\_\_  
Contact Title \_\_\_\_\_ Contact Phone# \_\_\_\_\_  
Other Contact Name \_\_\_\_\_ Contact Phone# \_\_\_\_\_

**Account Signer(s):**

**Name 1** \_\_\_\_\_ Title \_\_\_\_\_  
Home Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Employer Name \_\_\_\_\_  
Occupation \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Driver's License # \_\_\_\_\_ State of Issuance \_\_\_\_\_  
Driver's License Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Home Phone # \_\_\_\_\_ Cell or Secondary Phone# \_\_\_\_\_  
Signature \_\_\_\_\_

**Name 2** \_\_\_\_\_ Title \_\_\_\_\_  
Home Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Employer Name \_\_\_\_\_  
Occupation \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Driver's License # \_\_\_\_\_ State of Issuance \_\_\_\_\_  
Driver's License Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Home Phone # \_\_\_\_\_ Cell or Secondary Phone# \_\_\_\_\_  
Signature \_\_\_\_\_

**Name 3** \_\_\_\_\_ Title \_\_\_\_\_  
Home Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Employer Name \_\_\_\_\_  
Occupation \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Driver's License # \_\_\_\_\_ State of Issuance \_\_\_\_\_  
Driver's License Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Home Phone # \_\_\_\_\_ Cell or Secondary Phone# \_\_\_\_\_  
Signature \_\_\_\_\_

**Name 4** \_\_\_\_\_ Title \_\_\_\_\_  
Home Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Employer Name \_\_\_\_\_  
Occupation \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Driver's License # \_\_\_\_\_ State of Issuance \_\_\_\_\_  
Driver's License Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Home Phone # \_\_\_\_\_ Cell or Secondary Phone# \_\_\_\_\_  
Signature \_\_\_\_\_

**Name 5** \_\_\_\_\_ Title \_\_\_\_\_  
Home Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Employer Name \_\_\_\_\_  
Occupation \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Driver's License # \_\_\_\_\_ State of Issuance \_\_\_\_\_  
Driver's License Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Home Phone # \_\_\_\_\_ Cell or Secondary Phone# \_\_\_\_\_  
Signature \_\_\_\_\_

**Name 6** \_\_\_\_\_ Title \_\_\_\_\_  
Home Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Employer Name \_\_\_\_\_  
Occupation \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Driver's License # \_\_\_\_\_ State of Issuance \_\_\_\_\_  
Driver's License Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Home Phone # \_\_\_\_\_ Cell or Secondary Phone# \_\_\_\_\_  
Signature \_\_\_\_\_

Will you be ordering checks through an outside source? Yes \_\_\_ No \_\_\_

If ordering checks through First Federal Bank what style of check would you like?

Standard - 3 to-a-page \_\_\_\_\_ Color \_\_\_\_\_  
Voucher Checks \_\_\_\_\_ Color \_\_\_\_\_ No. of copies \_\_\_\_\_  
Starting No. \_\_\_\_\_

Deposit Slips: 3 to-a- page \_\_\_\_\_ or Tablet form \_\_\_\_\_ (single, dupl. or tripl.)

Do you have any other needs?      Automatic Transfers \_\_\_\_\_  
Merchant Services \_\_\_\_\_  
Wire Instructions \_\_\_\_\_  
Direct Deposit \_\_\_\_\_ Other \_\_\_\_\_

Would you be interested in on-line banking?      Yes \_\_\_ No \_\_\_  
Would you be interested in a loan?      Yes \_\_\_ No \_\_\_  
Would you be interested in a Debit Card?      Yes \_\_\_ No \_\_\_

**Documentation Required: Small Business/Non-Profit/Small Organization or Club**

Business License      Fictitious Name Statement  
501C3 if Non-Profit      Federal Tax Id Number  
Publication of Business Name  
Minutes of Meeting (election of new officers or change in signers if applicable)

**Documentation Required: Corporation and Non-Profit Corporation or Limited Liability Corporation**

Articles of Incorporation, Bylaws, any Amendments or Minutes for Designation of Officers, Federal Tax ID No., Business License  
LLC - Articles of Organization, Operating Agreement, any Amendments or Minutes for Designation of Members, Federal Tax ID No.

**Documentation Required: Partnership**

Partnership Agreement  
Any Amendments and Minutes  
Federal Tax ID No.

Special Instructions: \_\_\_\_\_  
\_\_\_\_\_