

Business Account Application

ACCOUNT DOMICILE Domestic Foreign Disregarded Entity

ACCOUNT OWNERSHIP

- | | | |
|--|---|---|
| <input type="checkbox"/> CORPORATION TYPE
<input type="checkbox"/> C Corp <input type="checkbox"/> S Corp | <input type="checkbox"/> PARTNERSHIP TYPE
<input type="checkbox"/> GENERAL
<input type="checkbox"/> JOINT VENTURE
<input type="checkbox"/> LTD PARTNERSHIP
<input type="checkbox"/> LTD LIABILITY | <input type="checkbox"/> SOLE PROPRIETORSHIP
<input type="checkbox"/> LIMITED LIABILITY COMPANY
<input type="checkbox"/> C Corp <input type="checkbox"/> S Corp <input type="checkbox"/> P Partnership
<input type="checkbox"/> GOVERNMENT ENTITY (Public Units, Public Funds)
<input type="checkbox"/> UNICORPORATED ASSOCIATION (Club, Group, etc)
<input type="checkbox"/> OTHER: _____ |
|--|---|---|

COMPANY NAME: _____

DBA (ASSUMED NAME): _____

ACCOUNT TITLE: _____

STATEMENT ADDRESS: _____

OFFICE ADDRESS (IF DIFFERENT): _____

COMPANY TAX ID#: _____ NUMBER OF SIGNATURES FOR WITHDRAWAL: _____

COMPANY PHONE NO.: _____ WILL FACSIMILE SIGNATURES BE USED? YES NO

COMPANY CONTACT NAME, TITLE: _____ If so, WHICH SIGNERS: _____

DIRECT PHONE : _____ DIRECT FAX: _____

EMAIL ADDRESS: _____

ARE ANY OF THE SIGNERS POLITICALLY EXPOSED? YES NO ANY SIGNERS EMPLOYED BY AMEGY? YES NO

IF SO, WHICH SIGNERS: _____ IF SO, WHICH SIGNERS: _____

PURPOSE OF ACCOUNT: _____ TYPE OF BUSINESS: _____

REFERRED BY _____ REASON FOR SELECTING AMEGY: _____

CURRENT FINANCIAL INST.: _____

FOR BANK USE ONLY (REVISED 04-28-2013)

DATE: _____ BRANCH / OFFICER: _____ OPENED BY: _____ OPENING DEPOSIT AMT: _____

NEW EXISTING CUSTOMER ACCOUNT TYPE: _____ ACCOUNT #: _____

CIP Collection Form (Treasury Management Only)

Important Account 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.

Signer Information

Signer's Name:

Social Security No:

Mother's Maiden Name:

Employer::

Occupation:

Phone Number:

Email Address:

Identification Information

Primary Identification	Identification Type (i.e. Driver's License):	
	Identification (Full) Name:	DOB: (mm/dd/yyyy)
	Address:	
	Number/Description:	Issuer:
	Issue Date (if applicable): (mm/dd/yyyy)	Expiration Date: (mm/dd/yyyy)

For bank use only:

Officer Name/z-Number:

Phone Number:

Branch Name:

Cost Center:



Certification Regarding Beneficial Owner (s) and Controlling Person of Legal Entity Customers

1. General Instructions

What is this form?

To help the government fight financial crime, federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who ultimately own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

Who must complete this form?

This form must be completed by the person opening a new account on behalf of a legal entity with any of the following U.S. financial institutions: (i) a bank or credit union; (ii) a broker or dealer in securities; (iii) a mutual fund; (iv) a futures commission merchant; or (v) an introducing broker in commodities. In some cases, a financial institution may request beneficial ownership information from existing customers.

For the purposes of this form, a legal entity includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. Legal entity *does not* include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

What information do I have to provide?

This form requires you to provide the name, address, date of birth and social security number (or passport number or other similar information, in the case of Non-U.S. Persons) for the following individuals (i.e., the **beneficial owners**):

- I. Each individual, *if any*, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation);
- II. An individual with significant responsibility for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President or Treasurer).

Amegy Bank will ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this form.

Beneficial Ownership Certification

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

Name of Natural Person Opening Account / Loan Request

Title of Natural Person Opening Account / Loan Request

Name of Legal Entity for Which the Account is Being Opened

Type of Legal Entity

Address of Legal Entity

Control Prong

Complete 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 the section above may also be listed in this section.)

Name/Title	Date of Birth	Address (Residential / Physical Address)	For U.S. Persons: Social Security Number ¹

ID Type

State/Country of Issuance

ID Number

Date of Issuance

Expiration Date

Ownership Prong

Complete 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:**

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

Owner #1

Name	Date of Birth	Address (Residential / Physical Address)	For U.S. Persons: Social Security Number ¹	Ownership Percentage

ID Type

State/Country of Issuance

ID Number

Date of Issuance

Expiration Date

¹ In lieu of a Social Security Number or passport number, Non-U.S. Persons may also provide an Individual Taxpayer Identification Number (ITIN), 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.

Owner #2

Name	Date of Birth	Address (Residential / Physical Address)	For U.S. Persons: Social Security Number ¹	Ownership Percentage

ID Type

State/Country of Issuance

ID Number

Date of Issuance

Expiration Date

Owner #3

Name	Date of Birth	Address (Residential / Physical Address)	For U.S. Persons: Social Security Number ¹	Ownership Percentage

ID Type

State/Country of Issuance

ID Number

Date of Issuance

Expiration Date

Owner #4

Name	Date of Birth	Address (Residential / Physical Address)	For U.S. Persons: Social Security Number ¹	Ownership Percentage

ID Type

State/Country of Issuance

ID Number

Date of Issuance

Expiration Date

¹ In lieu of a Social Security Number or passport number, Non-U.S. Persons may also provide an Individual Taxpayer Identification Number (ITIN), 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.

I, _____ (*name of natural person opening account*), hereby certify, to the best of my knowledge, that the information provided above is complete and correct. In addition, the above-listed legal entity hereby agrees to promptly notify the bank upon any change in the information provided above.



Signature: _____

Date: _____

CLIENT CHECKLIST FOR OPENING NEW ACCOUNTS

Association/Organization

- Meeting minutes, Bylaws, Charter, or Affirmative Statement (**MM**)
- Association Resolution (**ASR**)
- Beneficial Ownership Certification

Benefit/Memorial

- Trustee's TIN

Campaign

- Campaign Treasurer Appointment (**CTA**)
- Candidate's TIN
- Beneficial Ownership Certification

Corporation

- One of the following:
 - Certified Articles of Incorporation (**CAIC**)
 - Certificate of Association (**COAC**) (Professional Associations)
 - Certificate of Incorporation (**COIC**)
 - Certificate of Formation (**COFC**)
- Corporate Resolution (**CORP**)
- Assumed Name Certificate (**BUSL**) *if applicable*
- Beneficial Ownership Certification

Estate

- Letters of Testamentary (**LOT**) or Letters of Administration (**LOA**)

Guardianship

- TIN of Beneficial Owner
- Letter of Guardianship (**LOG**)

IOLTA

Interest on Lawyer's Trust Account

- Texas Equal Access to Justice Foundation TIN
- Attorney's EIN
- IOLTA Notice to Financial Institution and Foundation (**INIF**)
- Power of Attorney for IOLTAs (**POA**)
- All standard documents for business type
- Beneficial Ownership Certification

Limited Liability Company (LLC)

- Certificate/Articles of Organization (**AOOL**) or Certificate of Formation (**COFL**)
- Assumed Name Certificate (**BUSL**) *if applicable*
- Beneficial Ownership Certification

Non-Profit Status

- IRS Letter of Determination (**NPLD**)
- All standard documents for business account type

Political Action Committee (PAC)

- One of the following:
 - Association Resolution (**AR**)
 - Charter (**CH**)
 - By-laws (**BL**)
 - Articles of Organization (**AOOC**)
 - Certificate of Formation (**COFP**)
- Copy of filing with Texas Ethics Commission or Federal Election Commission documenting Appointment of Treasurer (**CTA**)

For a FEDERAL OFFICE:

- Statement of Organization (**SOFD**) and EIN

For a SPECIFIC PURPOSE COMMITTEE:

- Specific Purpose Committee Form (**SPCF**) and EIN
- Beneficial Ownership Certification

Partnership

General, Joint Venture, Limited, or Limited Liability Partnership (LLP)

- Partnership Agreement (**PART**) *If applicable*
- Partnership Resolution (**PRP**)
- Certificate of Limited Partnership (**CFLP**) *if applicable* or Certificate of Formation (**CFP**)
- Assumed Name Certificate (**BUSL**) *if applicable*
- Beneficial Ownership Certification

Public Funds*

**May only be opened when instructed by Treasury Management*

- Public Fund Authorization (**PFA**)
- Beneficial Ownership Certification

Registered Limited Liability Partnership

- Letter from the Secretary of State acknowledging limited liability status (**LLP**)
- All other Partnership documents needed (See **Partnership**)
- Beneficial Ownership Certification

Representative Payee

- TIN of Beneficial Owner
- Letter from the Social Security Administration or VA (**RPL**)

Sole Proprietorship

- Sole Proprietorship Resolution (if there is a non-spousal signer)
- Business address
- Assumed Name Certificate (**BUSL**)

Trust

- Trust EIN -or- Grantor TIN
- Trust Certification Form (**TCF**) or Excerpts of Trust Agreement (**TA**)

TUTMA

Texas Uniform Transfer to Minors Act

- TIN of Minor

**If client indicates they are exempt from BOI contact A-line*