



Bank Use Only	Date _____
	Branch _____
	CSR Initials _____
	___ Checking Account # _____
	___ Savings Account # _____

BUSINESS ACCOUNT SIGNERS APPLICATION

1 st Account Signer	2 nd Account Signer
Name _____	Name _____
Street Address _____	Street Address _____
City/State/Zip _____	City/State/Zip _____
Residence Ph. Primary: _____ Secondary: _____	Residence Ph. Primary: _____ Secondary: _____
Bus./Work Ph. Primary: _____ Secondary: _____	Bus./Work Ph. Primary: _____ Secondary: _____
Cell Ph. Primary: _____ Secondary: _____	Cell Ph. Primary: _____ Secondary: _____
E-Mail Address _____	E-Mail Address _____
Business E-Mail _____	Business E-Mail _____
Social Security # _____	Social Security # _____
Drivers License # _____ State _____	Drivers License # _____ State _____
Date of Birth _____	Date of Birth _____
Name of closest relative not living with you: _____	Name of closest relative not living with you: _____
Address _____	Address _____
Referred by: _____	Referred by: _____

IMPORTANT: Please read before signing.

I/We hereby authorize the Bank to obtain such information as it may require concerning this application and agree that such information, as well as this application shall remain the Banks property whether or not the account is opened. Upon approval, this account will be opened under a 90 day probationary period. McKenzie Banking Company/Foundation Bank, Division of McKenzie Banking Company reserves the right to close this account for reasons it deems necessary, at any time. By signing below you are certifying that the information provided is true and correct. The undersigned further authorizes the financial institution to use verification methods necessary on the undersigned, as individuals.

Signature	Signature
Title/Position	Title/Position

Bank Use Only (* = Required)

___ 2 forms of Acceptable ID*	___ Loan Officer Intro	___ Safe Deposit Box # _____
___ USInfosearch*	___ Check order	___ Merchant Services (BancCard)
___ OFAC*	___ Debit/ATM Card	___ Cash Mgmt
___ Disclosures*	___ Electronic Banking Services Info	___ Other
___ BNControl /New Acct Business Worksheet (if applicable)*		

_____ Scan Into Bank Mgr _____ Initial _____ Date