



# Company Electronic Banking Profile

Business Name: \_\_\_\_\_

Name of Owner/Manager: \_\_\_\_\_

Tax ID #: \_\_\_\_\_ Company Phone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

Type of Entity:  Corp  LLC  Non-Profit  Sole Proprietorship  Partnership  Other: \_\_\_\_\_

ONLINE BANKING (sole proprietorships and unincorporated non-profit organizations) Please complete and attach Business Online Banking User Information form for each user. **Please note users must be authorized signers on the account.**

BUSINESS eBANKING (Corporations, Partnerships and LLCs) Please complete and attach Business eBanking Company Set Up Information form. (Some services, such as ACH and Positive Pay, require separate agreements before service is enabled.) **Please note that primary user must be an authorized signer on the account.**

\_\_\_\_\_  
Signature of Owner/Authorized Signer

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

### FOR INTERNAL USE ONLY

Please attach copy of corporate resolutions and signature cards for all deposit accounts to be enrolled in Electronic Banking

All required CIP information has been submitted  Yes  No

*(If no, please make customer aware that online access will not be granted until all documentation is received, approved and verified.)*

Branch \_\_\_\_\_ Employee \_\_\_\_\_ Date \_\_\_\_\_

#### Account Setup

Employee \_\_\_\_\_ Date \_\_\_\_\_

