

PEOPLES STATE BANK BUSINESS LOAN CUSTOMER IDENTIFICATION PROGRAM (CIP)

ACCOUNT HOLDER INFORMATION

BUSINESS NAME	EMPLOYER IDENTIFICATION NUMBER	
STREET ADDRESS	APT #	P.O. BOX
CITY	STATE	ZIP
PHONE	CELL PHONE	
EMAIL ADDRESS		

BUSINESS TYPE

SOLE PROPRIETORSHIP <input type="checkbox"/>	CORPORATION-FOR PROFIT <input type="checkbox"/>
CORPORATION-NON PROFIT <input type="checkbox"/>	PARTNERSHIP <input type="checkbox"/>
LIMITED LIABILITY COMPANY <input type="checkbox"/>	OTHER: _____ <input type="checkbox"/>
MUNICIPAL <input type="checkbox"/>	

BUSINESS DOCUMENTS PROVIDED

CERTIFICATE OF ASSUMED NAME <input type="checkbox"/>	ARTICLES OF INCORPORATION <input type="checkbox"/>
PARTNERSHIP AGREEMENT <input type="checkbox"/>	ARTICLES OF ORGANIZATION <input type="checkbox"/>
ELECTION OF OFFICERS <input type="checkbox"/>	MSB REGISTRATION <input type="checkbox"/>
MEETING MINUTES <input type="checkbox"/>	RESOLUTION <input type="checkbox"/>
LICENSE FOR PRIVATELY OWNED ATM <input type="checkbox"/>	

DOES YOUR BUSINESS ENGAGE IN ANY OF THE FOLLOWING?

ISSUING, SELLING, OR REDEMPTION OF MONEY ORDERS, TRAVELER'S CHECKS, OR PREPAID ACCESS	YES <input type="checkbox"/>	NO <input type="checkbox"/>
THIRD PARTY CHECK CASHING	YES <input type="checkbox"/>	NO <input type="checkbox"/>
THIRD PARTY CURRENCY EXCHANGE OR DEALINGS	YES <input type="checkbox"/>	NO <input type="checkbox"/>
IF YOU ANSWERED YES TO ANY OF THE ITEMS ABOVE, IS THE CASH INVOLVED EVER GREATER THAN \$1,000?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
ARE YOU A MONEY SERVICE BUSINESS (MSB)?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
IF YES, HAVE YOU PROVIDED US WITH YOUR MONEY SERVICE BUSINESS REGISTRATION?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
ARE YOU ENGAGED IN MARIJUANA RELATED BUSINESSES?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

DO YOU HAVE A PRIVATELY OWNED ATM? YES NO

IF YES, PLEASE ANSWER THE FOLLOWING QUESTIONS:

HOW DO YOU FUND THE ATM? _____

WHERE IS THE ATM LOCATED? _____

WHO SERVICES THE ATM? PLEASE PROVIDE A COPY OF THE SERVICE AGREEMENT. _____

REG GG QUESTIONS

(REG GG IS THE PROHIBITION OF FUNDING OF UNLAWFUL INTERNET GAMBLING.)

WHAT TYPE OF BUSINESS ARE YOU ENGAGED IN: _____

DO YOU PERFORM TRANSACTIONS ONLINE? YES NO IF YES, WHAT TYPES? _____

ARE ANY ACTIVITIES GAMBLING ACTIVITIES? YES NO

SIGNATURE _____ DATE _____

I ACKNOWLEDGE THAT A PERSON SUPPLYING A FALSE MATERIAL STATEMENT THAT IS BELIEVED NOT TO BE TRUE WITH RESPECT TO INFORMATION REQUESTED ON THIS APPLICATION FORM IS GUILTY OF PERJURY. THE INFORMATION I HAVE PROVIDED IS CORRECT TO THE BEST OF MY KNOWLEDGE. THIS ACCOUNT WILL BE CONSIDERED A TEMPORARY AGREEMENT PENDING VERIFICATION OF OFAC STANDING THROUGH KROLL FACTUAL DATA. IF YOU ARE NOT CURRENTLY A DEPOSIT ACCOUNT HOLDER BUT WISH TO BECOME ONE IN THE FUTURE, YOU ARE GIVING THE BANK PERMISSION TO PERFORM ID VERIFICATION THROUGH QUALIFILE BY SIGNING THIS DOCUMENT.

NOTARY SIGNATURE REQUIRED IF NOT SIGNED IN THE PRESENCE OF A BANK REPRESENTATIVE

NOTARY _____ COUNTY _____

MY COMMISSION EXPIRES _____ STATE OF _____

TO BE COMPLETED BY FINANCIAL INSTITUTION

COMMERCIAL LOAN CUSTOMER

NEW IN PERSON _____

NEW OTHER THAN IN PERSON _____

REQUIREMENTS

BUSINESS ORGANIZATIONAL DOCUMENT _____

CHECK OFAC LIST _____

CALL VENDORS OF BUSINESS _____

VERIFY GOOD STANDING WITH THE STATE _____

CALL TO VERIFY EXISTENCE OF BUSINESS PHONE NUMBER _____

VERIFIED DIFFERENCES WITH CUSTOMERS?: _____

YES

NO

N/A

WAS THE ACCOUNT OPENED BY MAIL?: _____

WAS THE ACCOUNT OPENED BY FAX OR EMAIL?: _____

WERE COPIES OF NECESSARY BUSINESS DOCUMENTS OBTAINED?: _____

WAS A COPY OF THE LICENSING TO PARTICIPATE IN ONLINE GAMBLING OBTAINED? _____

ANSWER THE FOLLOWING QUESTIONS AS THEY APPLY TO THE RED FLAGS PROGRAM:

1. IS THE PHOTOGRAPH OR PHYSICAL DESCRIPTION ON THE ID CONSISTENT WITH THE APPEARANCE OF THE APPLICANT OR CUSTOMER PRESENTING THE ID? _____

YES

NO

N/A

2. IS THE OTHER INFORMATION ON THE ID CONSISTENT WITH THE INFORMATION PROVIDED BY THE PERSON OPENING THE ACCOUNT? _____

3. WAS MINIMAL, VAGUE, OR FICTITIOUS INFORMATION PROVIDED THAT THE BANK CANNOT READILY VERIFY? _____

4. LACK OF IDENTIFICATION - DID THE INDIVIDUAL ATTEMPT TO OPEN AN ACCOUNT OR CHANGE THEIR ADDRESS WITHOUT ID OR GIVE VAGUE INFORMATION, OR REFUSE TO PROVIDE THE INFORMATION NEEDED BY THE BANK? WERE DOCUMENTS PROVIDED THAT APPEARED TO HAVE BEEN ALTERED OR FORGED? _____

5. DID THE INDIVIDUAL HAVE A NON LOCAL RESIDENTIAL OR BUSINESS ADDRESS WITH APPARENT LEGITIMATE REASON FOR OPENING THE ACCOUNT WITH OUR BANK? _____

6. WAS THE TAXPAYER IDENTIFICATION NUMBER PROVIDED THE SAME AS THAT PROVIDED BY ANOTHER CUSTOMER? _____

*VERIFICATION IS COMPLETED BY INPUTTING THE TAXPAYER IDENTIFICATION NUMBER PROVIDED INTO OUR CORE SYSTEM AND SEARCHING FOR A POTENTIAL MATCH.

KROLL FACTUAL DATA VERIFICATION:

INTERNET YES NO _____

PER PHONE CALL YES NO _____

EMPLOYEE _____

BRANCH _____

DATE _____

HIGH FINANCIAL CRIMES AREA (HIFCA) _____

YES NO _____

HIFCA LOCATION _____

HIGH INTENSITY DRUG TRAFFICKING AREA (HIDTA) _____

YES NO _____

HIDTA LOCATION _____

REVIEWED BY _____

RISK RATED BY _____

RISK RATING _____