

PEOPLES STATE BANK TRUST LOAN CUSTOMER IDENTIFICATION PROGRAM (CIP)

ACCOUNT HOLDER INFORMATION

NAME _____

TAXPAYER ID NUMBER _____ TRUST DATE _____

STREET ADDRESS _____ APT # _____ P.O. BOX _____

CITY _____ STATE _____ ZIP _____

PHONE _____ CELL PHONE _____ WORK PHONE _____

TRUSTEES _____

PLEASE OBTAIN A CIP FOR EACH TRUSTEE IF NEEDED

PERSONAL REPRESENTATIVE OF THE ESTATE _____

PLEASE OBTAIN A CIP FOR THE PERSONAL REP. IF NEEDED

DOCUMENTS PROVIDED: CERTIFICATE OF TRUST EXISTENCE _____ LETTERS OF AUTHORITY _____

ARE YOU ENGAGED IN MARIJUANA RELATED BUSINESSES? YES _____ NO _____

LOAN INFORMATION

LOAN TYPE COMMERCIAL _____ AUTOMOBILE _____ MORTGAGE _____
INSTALLMENT _____ HOME EQUITY _____ CONSTRUCTION _____

PURPOSE OF LOAN _____

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 CHEXSYSTEMS. 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

TRUST/ESTATE LOAN CUSTOMER

NEW IN PERSON _____

NEW OTHER THAN IN PERSON _____

REQUIREMENTS

CERTIFICATE OF TRUST EXISTENCE _____

LETTERS OF AUTHORITY _____

CHECK OF AC LIST _____

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 LEGAL DOCUMENTS 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. DOES THE TRUST 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 YES NO

EMPLOYEE _____ BRANCH _____

DATE _____

HIGH FINANCIAL CRIMES AREA (HIFCA) YES NO

HIFCA LOCATION _____

HIGH INTENSITY DRUG TRAFFICKING AREA (HI) YES NO

HIDTA LOCATION _____

REVIEWED BY _____

RISK RATED BY _____

RISK RATING _____