



FOR OFFICE USE ONLY

Acct #(s): _____ / _____

Dep Amt(s): _____ / _____

Ckg Plan _____ Checking
 Sav/CD SDB
 Commercial Loan

CIP FORM – BUSINESS DEPOSITS/LOAN

Important Information about Procedures for Opening a New Account

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

BUSINESS INFORMATION

Business Name _____

Street Address _____ City _____ State/Country _____ Zip _____

Mailing Address (if different) _____ City _____ State/Country _____ Zip _____

EIN/SSN _____ () _____ () _____ () _____
 Phone Alternate Phone Fax

E-mail Address _____

Verification Documents

<p>Corporation</p> <p><input type="checkbox"/> Articles of Incorporation</p> <p><input type="checkbox"/> Corporate Resolution</p> <p><input type="checkbox"/> By-Laws (if available)</p> <p><input type="checkbox"/> Current DCCA registration (Form DC-1) or online verification</p>	<p>Limited Liability Company (LLC)</p> <p><input type="checkbox"/> Articles of Organization/Incorporation</p> <p><input type="checkbox"/> Operating Agreement</p> <p><input type="checkbox"/> Current DCCA registration (Form LLC-1) or online verification</p>
<p>Partnership</p> <p><input type="checkbox"/> Partnership Agreement with notarized signature of general partners</p> <p><input type="checkbox"/> Partnership Resolution</p> <p><input type="checkbox"/> Current DCCA registration (Form GP-1) or online verification</p>	<p>Limited Liability Partnership (LLP)</p> <p><input type="checkbox"/> Certificate of Limited Liability Partnerships</p> <p><input type="checkbox"/> Current DCCA registration (Form LP-1) or online verification</p>
<p>Non-Profit Organizations*</p> <p><input type="checkbox"/> Articles of Incorporation</p> <p><input type="checkbox"/> Corporate Resolution</p> <p><input type="checkbox"/> By-Laws (if available)</p> <p><input type="checkbox"/> Current DCCA registration (Form DNP-1) or online verification</p>	<p>Non-Profit/Charitable Organizations/Unincorporated Organization (One of the following documents)</p> <p><input type="checkbox"/> Articles of Association</p> <p><input type="checkbox"/> Constitution and Bylaws</p> <p><input type="checkbox"/> Board Resolution</p> <p><input type="checkbox"/> Minutes from the meeting authorizing the opening of an account, states purpose of the organization, lists the authorized signers, and gives the number of signers to withdraw</p> <p><input type="checkbox"/> Other documents establishing the entity</p>
<p>Sole Proprietor</p> <p><input type="checkbox"/> General Excise Tax License</p> <p><input type="checkbox"/> Certified Copy of DCCA Registration of Trade Name</p>	

BUSINESS INFORMATION DISCREPANCIES

Note any differences between the information provided in the Business Information section and the business documents presented. Document the steps taken to resolve the differences (i.e., What steps were taken to ensure the existence of the business? For example, utility bill or letter mailed to business at address written in Business Information section, etc.).

Type of Discrepancy: EIN/SSN Name Address

Steps Taken to resolve/Additional Information:



CIP FORM – RETAIL DEPOSITS/LOANS

Important Information about Procedures for Opening a New Account

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

ACCOUNT OWNER	POA INFORMATION	ADD JOINT ACCOUNT OWNER
Name (First MI Last)		
Street Address; include Apartment or Suite # if appropriate		City State/Country Zip
Mailing Address (if different)		City State/Country Zip
() Home Phone	() Alternate Phone (e.g., business, cell, etc.)	E-mail Address
Identification Number	Date of Birth	Mother's Maiden Name (Last name only)
Employer Name	Job Title/Occupation	
Check 1: <input type="checkbox"/> Current <input type="checkbox"/> Past <input type="checkbox"/> Retired from		

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ID Type/Verification Documents:

Driver's License
 State ID
 US Military/Gov't ID
 Credit Card
 Utility Bill
 Bus Pass
 Other _____

Student ID (Restricted to persons 17 or under with Social Security Card)

Passport (If US Passport, provide a secondary/alternative ID **(required)**. (Refer to list of Secondary and Alternative IDs in Br Procedure 1300D-03.01PROC.)

Credit Report (**Loans Only**)
 Resident Alien Card *photocopy required

Other _____ (Contact BSA/AML Officer or BSA/AML Specialist Supervisor) Approved by: _____

Issuing State/Country	ID Number	Issue Date	Expire Date
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CUSTOMER INFORMATION DISCREPANCIES

Note any differences between the information provided in the Account Owner Information section and the ID presented. Document the steps taken to resolve the differences (i.e., What steps were taken to ensure the identity of the customer? For example, customer provided a utility bill, letter mailed to customer at address written in Account Owner / POA Information section, etc.).

Type of Discrepancy:
 ID Number
 Name
 Address
 DOB

Steps taken to resolve/Additional Information:



BUSINESS ACCOUNT QUESTIONNAIRE

(PLEASE PRINT)

- 1. How long have you been in business?
2. How many locations will you have?
3. Did you have a prior banking relationship for your business?
If yes, please provide name of bank and your reason for leaving, if any.

- 4. Source of income: Provide a brief description of your business and include the kinds of products and/or services you provide.

- 5. Which of the following services do you plan to use? (Check all that apply.)

Domestic Wires
Incoming Frequency: Weekly, Monthly, N/A
Outgoing Frequency: Weekly, Monthly, N/A

International Wires
Countries:
Incoming Frequency: Weekly, Monthly, N/A
Outgoing Frequency: Weekly, Monthly, N/A

ACH
Incoming Frequency: Weekly, Monthly, N/A
Outgoing Frequency: Weekly, Monthly, N/A

Cash
Deposits: Weekly, Monthly, N/A
Withdrawals: Weekly, Monthly, N/A

- 6. In what state or foreign country, if applicable, is your Corporate Office located?

REVIEWER: Please ensure the following:

- Form is complete
Information provided on Questionnaire is consistent and reasonable with other information provided on CIP Form
CIP Form was scanned and emailed to Branch Admin and date scanned field is completed, if applicable

Input By:
Reviewed By:
Branch:

Date:
Date scanned:
Retention: 6 years after account(s) is closed.

CERTIFICATION REGARDING BENEFICIAL OWNERS OF LEGAL ENTITY CUSTOMERS¹

("Beneficial Ownership Form")

I. 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 own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

Who has to 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.

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 foreign 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); **and**
- (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).

The number of individuals that satisfy this definition of "beneficial owner" may vary. Under section (i), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (i), you must provide the identifying information of one individual under section (ii). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30% equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii) and four 25 percent equity holders under section (i)).

The financial institution may also ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this form.

II. CERTIFICATION OF BENEFICIAL OWNER(S)

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

a. Name and Title of Natural Person Opening Account:

b. Name and Address of Legal Entity for Which the Account is Being Opened:

c. 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"):

¹ Derived from, and substantially similar to, Appendix A to C.F.R. § 1010.230.

Name	Date of Birth	Address (Residential or Business Street Address)	For U.S. Persons: Social Security Number	For Foreign Persons: Passport Number and Country of Issuance, or other similar identification number*	ID Type, ID #, Issuing State, Issue Date, Expiration Date	Equity Interest (%)

d. 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 section (c) above may also be listed in this section (d).)

Name	Title	Date of Birth	Address (Residential or Business Street Address)	For U.S. Persons: Social Security Number	For Foreign Persons: Passport Number and Country of Issuance, or other similar identification number*	ID Type, ID #, Issuing State, Issue Date, Expiration Date

I, _____ (name of natural person opening account), hereby certify, to the best of my knowledge, that the information provided above is complete and correct. I also agree to notify Territorial Savings Bank of any change to the information provided within this Certification.

Signature: _____ Date: _____

* In lieu of a passport number, foreign persons may also provide 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.