Ohana Pacific Bank

# New Account Checklist - Business

| Account Number: | Portfolio: | Open Date: |
|---|---|---|

| | |
|---|---|
| **CHECKING** | ☐ Checking ☐ Money Market |
| **SAVINGS** | ☐ Savings ☐ Installment Savings (Contract Amount: $_____ Term:_____ Payment:_____) |
| **TCD** | Deposit Period: _____ Interest Rate: _____ Maturity Date: _____ APY: _____<br>Interest payment: ☐ At Maturity ☐ Monthly: ___ by Cashier's Check ___ credit to Account No._____<br>At the time of maturity: ☐ Auto renewal of the principal and interest<br>☐ Auto renewal of the principal **only** and credit interest to Account No. _____<br>☐ Credit payment of the principal and interest to Account No. _____ |

Entity Type: ☐ Sole Proprietorship ☐ Partnership ☐ Corporation ☐ LLC ☐ Other _____

| | |
|---|---|
| Sole Proprietor or Company Name | Federal (Tax) ID Number |
| DBA (if any) | Year Established |
| Address (Number, Street, Suite No) | Type of Business |
| City / State / Zip Code | Phone Number |
| Mailing Address (If different from above) | |

**Personal/Employment Information**

| 1. Name (Last, First, Middle) | | | 2. Name (Last, First, Middle) | | | 3. Name (Last, First, Middle) | | |
|---|---|---|---|---|---|---|---|---|
| Title | SSN | | Title | SSN | | Title | SSN | |
| ID Type & Number | Mother's Maiden Name | | ID Type & Number | Mother's Maiden Name | | ID Type & Number | Mother's Maiden Name | |
| Place of Issuance | Issue Date | Expiry Date | Place of Issuance | Issue Date | Expiry Date | Place of Issuance | Issue Date | Expiry Date |
| Date of Birth | Place of Birth | | Date of Birth | Place of Birth | | Date of Birth | Place of Birth | |
| Home Phone | Cellular | | Home Phone | Cellular | | Home Phone | Cellular | |
| Home Address | | | Home Address | | | Home Address | | |
| City | State | Zip | City | State | Zip | City | State | Zip |

**PREVIOUS BANK REFERENCE**
Bank Name & Branch:

**REMINDER FOR OPENING A NEW ACCOUNT:** To help the government fight the funding of terrorism and money laundering activities, OPB obtains, verifies, and records information that identifies each person opening an account. The identifying information will include, but not limited to, name, valid photo ID, TIN, address, and DOB.

**BANK USE ONLY**

Opening Deposit: $ _____
Source of Funds: Cash _____, Check _____
Other (Specify) _____
Large Cash Deposit($5,000 or More): ☐ Yes ☐ No
If Yes, Explain _____
Frequent Cash Transaction: ☐ Yes ☐ No
If Yes, Monthly Volume: C/I _____ C/O _____
Frequent Wire Transfer: ☐ Yes ☐ No
If Yes, Monthly Volume: W/I _____ W/O _____
Expected Average Balance: $ _____
Expected No. of Checks Issued Per Month: _____

Approximate Annual Sales: $ _____
Names of major suppliers/vendors/customers: _____
Please check and specify type of business:
Domestic: _____ Foreign: _____ (Name of Country): _____
Retail: _____ Wholesale: _____ Manufacturing: _____
Service Provider: _____ Import/Export: _____ (Name of Country): _____
Markets are served by the business: _____
Description of goods sold or services performed: _____

Does the business engage in internet gambling? ☐ Yes ☐ No
Internet Gambling Risk: ☐ Minimal ☐ Yes, or Unable to Determine
If YES: a. Send/rec'v money from Internet? ☐ Yes ☐ No b. Credit cards by phone? ☐ Yes ☐ No c. Business includes gambling? ☐ Yes ☐ No

| | |
|---|---|
| BSA Type Code | |
| BSA Risk Code | |
| NAICS Code | |

Does customer order debit card? ☐ Yes ☐ No (If "Yes", order # )
Does customer order check? ☐ Yes ☐ No (If "Yes", product code: )

*Remarks:*

| Chex System | OFAC Check | Prepared By | Input By | Approved By |
|---|---|---|---|---|
| | | | | |