



Flatirons Bank

NEW ACCOUNT WORKSHEET – ATTORNEY ACCOUNTS

New Account Application		Update to Existing Account (Complete only account # and signer fields.) Add authorized signer		Account Number:	
Business/Entity Name:			Taxpayer ID #:		
Doing Business As:			Company Website:		
Street Address: (physical address must be provided)			City:	State:	Zip:
Mailing Address: (if different from street address)			City:	State:	Zip:
Business Phone:	Business Fax:		Email Address:		
Signer Legal Name (1):			Business Title:		
Street Address: (physical address must be provided)			Social Security #:		Date of Birth:
City:	State:	Zip:	Mother's Maiden Name:		Birthplace City:
Mailing Address: (if different from street address)			Email Address:		
City:	State:	Zip:	Home Phone:	Work Phone:	Cell Phone:
Signer Legal Name (2):			Business Title:		
Street Address: (physical address must be provided)			Social Security #:		Date of Birth:
City:	State:	Zip:	Mother's Maiden Name:		Birthplace City:
Mailing Address: (if different from street address)			Email Address:		
City:	State:	Zip:	Home Phone:	Work Phone:	Cell Phone:
Signer Legal Name (3):			Business Title:		
Street Address: (physical address must be provided)			Social Security #:		Date of Birth:
City:	State:	Zip:	Mother's Maiden Name:		Birthplace City:
Mailing Address: (if different from street address)			Email Address:		
City:	State:	Zip:	Home Phone:	Work Phone:	Cell Phone:

How did you hear about Flatirons Bank?		
What is the nature of your business?		
Do you anticipate your monthly cash deposits to exceed \$3,000?	Yes	No
Do you anticipate your monthly incoming wire transactions to exceed \$10,000?	Yes	No
Do you anticipate your monthly outgoing wire transactions to exceed \$10,000?	Yes	No
Do you anticipate your monthly incoming ACH transactions to exceed \$10,000?	Yes	No
Do you anticipate your monthly outgoing ACH transactions to exceed \$10,000?	Yes	No

I/We, the authorizing officers whose signatures appear below, certify that I/we am/are not conducting a money service business and are not a US Postal Service and do not/will not conduct any of the following services for myself/ourselves, on behalf of, or for the benefit of other third parties:

- Cash checks for others
- Sell money orders or traveler's checks
- Perform wire transfer/money transmitting services for others (Money Gram/Western Union, etc.)
- Deal in foreign currency exchange
- Sell prepaid access cards
- Operate a private ATM

I/We further certify that the Business/Entity does not offer internet gambling services. I/We agree to notify Flatirons Bank (the "Bank") immediately of any changes in circumstances or status that affect my/our compliance with this provision.

I/We hereby apply for the business account described in this application. I/We certify that I/we made no misrepresentations in this application or in any related documents, that all information is true and complete, and that I/we did not omit any important information. The Bank is authorized to verify with other parties and to make any investigation of my/our credit and/or employment history, either directly or through any agency employed by the Bank for that purpose. The Bank may disclose to any other interested parties' information as to the Bank's experiences or transactions with my/our account. I/We understand that the Bank will retain this application and any other credit information the Bank receives, even if no credit is granted. This application is subject to the policies of this institution. I/We agree to be bound by the terms and conditions of the Deposit Account Agreement and Disclosure and other applicable agreements and disclosures. I/We understand that the Bank reserves the right to request additional financial information in order to determine eligibility for and products or services pursuant to this application.

Name(s) of Authorizing Officer(s):	Signature(s) of Authorizing Officer(s):	Date:

INTERNAL USE:		
Account Information:		
Account Number:	Amount of Opening Deposit: \$ _____	
Account Type:	Source of Funds:	Cash
Date Account Opened:		Check
Online Search Conducted?	Yes No	Internal Transfer
Approvals:		
Employee Name:	Reviewed By:	Date: