



Habib American Bank



BUSINESS ACCOUNT SET-UP FORM

Date:	Type of Account:
Information Completed By:	Account# Assigned:
Special Instructions:	

BUSINESS INFORMATION

Business Name:		
Address:		
City:	State:	Zip Code:
Primary Phone Number:		Alternative Phone Number:
E-Mail Address:	Tax Identification #:	Are You a Current Customer? YES NO
Type of Business:		Sales From Prior Year:
Business Registration(Example: LLC, Partnership, Corporation etc):		Chex System Verification:
Name and Title:	Social Security#:	Drivers License#:
Address:		Date of Birth:
Name and Title:	Social Security#:	Drivers License#:
Address:		Date of Birth:
Name and Title:	Social Security#:	Drivers License#:
Address:		Date of Birth:
Name and Title:	Social Security#:	Drivers License#:
Address:		Date of Birth:
Name and Title:	Social Security#:	Drivers License#:
Address:		Date of Birth:

This information is true and correct to the best of my knowledge.

OTHER INFORMATION

Required Documents:

1. Filing Receipt
2. Tax ID
3. Certificate of Incorporation. In case of LLC, Articles of LLC
4. Two IDs of each signatory
5. SS and Address for all signatories
6. CPA/ Accountant's letter confirming the ownership structure

TO BE COMPLETED BY CSR.

Would client be interested in any of the following products?

- CHECKING SAVINGS MONEY MARKET CD'S ATM RESIDENTIAL MORTGAGE
 COMMERCIAL MORTGAGE OTHER:

Is there someone client would like to refer to Habib American Bank?

Name:

Address:

Phone Number:

Customer Signature: _____ Date: _____

Customer Service Representative: _____ Date: _____

BRANCH LOCATIONS

99 Madison Ave, New York, NY 10016 * Phone: 212 532 4444
110 East 9TH Street AL10, Los Angeles, CA 90079 *Phone: 213 362 1200
1667 Oak Tree Road, Edison, NJ 08820 *Phone: 732 205 1777

74-05/07 37th Ave, Jackson Height, NY 11372 *Phone: 718 379 0890
18357 Pioneer Blvd, Artesia, CA 90701 *Phone: 562 924 7500
421 South Broadway, Hicksville, NY 11801 *Phone: 516 681 5200

Reset Form **Print Form**

www.habibamericanbank.com

