



## Customer Identification & Certification Of Beneficial Owner(s)

<b>Full Legal Entity Name</b>	<b>EIN</b>	<b>Physical Business Address</b>

### Beneficial Owners:

Complete the following information for **each** individual, if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 25% or more of the equity interests of the legal entity listed above. If no individual meets this definition, check box & complete Account Manager section.  Not applicable

If Self-Employed/Sole Proprietor, check box and complete Account Manager section.  NA- Sole Proprietor

Owner #1			
<b>Full Name</b>	<b>Ownership %</b>	<b>Date of Birth</b>	<b>Residential Address</b>
<b>Social Security Number **</b>	<b>Driver's License Number</b>	<b>License Issue Date</b>	<b>License Expiry Date</b>

Owner #2			
<b>Full Name</b>	<b>Ownership %</b>	<b>Date of Birth</b>	<b>Residential Address</b>
<b>Social Security Number **</b>	<b>Driver's License Number</b>	<b>License Issue Date</b>	<b>License Expiry Date</b>

Owner #3			
<b>Full Name</b>	<b>Ownership %</b>	<b>Date of Birth</b>	<b>Residential Address</b>
<b>Social Security Number **</b>	<b>Driver's License Number</b>	<b>License Issue Date</b>	<b>License Expiry Date</b>

Owner #4			
<b>Full Name</b>	<b>Ownership %</b>	<b>Date of Birth</b>	<b>Residential Address</b>
<b>Social Security Number **</b>	<b>Driver's License Number</b>	<b>License Issue Date</b>	<b>License Expiry Date</b>

### Account Manager:

Complete 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).
- Self-employed person.

Account Manager			
Full Name		Date of Birth	Residential Address
Social Security Number **	Driver's License Number	License Issue Date	License Expiry 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.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

Updated 1/9/2021