



9700 Touchton Road • Jacksonville, FL 32246
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APP

TO BE COMPLETED FOR BUSINESS ACCOUNTS - PLEASE PRINT

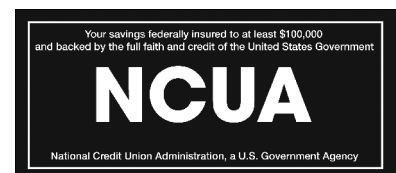
Business Membership Eligibility: Companies located in, or with corporate headquarters in the Greater Jacksonville Area* are eligible to be Business Members at Florida Telco Credit Union. Also eligible without geographic restrictions are telecommunications companies.

Account Eligibility: <input type="checkbox"/> Community Charter <input type="checkbox"/> Telecommunications			Number of Business Owners:
Business Name			
Business Mailing Address			City, State Zip
Business Physical Street Address (including suite # if applicable)			City, State Zip
Main Phone Number	Alternate Phone Number	E-Mail Address	
<input type="checkbox"/> EIN <input type="checkbox"/> SSN <input type="checkbox"/> ITIN	Date of Entity Creation (MM/DD/YYYY)	Business License Number	
Issue Date	Expiration Date	Issuing Authority	Other Identification - Type†
Issue Date	Expiration Date	Issuing Authority	Description

Business Owner (Joint 1)			Name		Time at this address Years Months	
Home Phone Number		Cell Phone Number		Work Phone Number		Date of Birth (MM/DD/YYYY)
Mother's Maiden Name		Country of Citizenship:		City, State & Country of Birth		
Driver's License Number		Social Security Number		Issue Date		Expiration Date Issuing Authority
Current Employment Status <input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Not Applicable				Business Name/Occupation Title		
Address				City, State Zip		Time at Work Years Months

*The Greater Jacksonville Area is defined as: Duval, Clay, St. Johns, Nassau, Baker, Columbia, Union, Bradford, Alachua, Putnam, and Flagler counties.

†Court Papers, Power of Attorney, SSI Instruction Letter, Trust Agreement, Articles of Incorp., Partnership Papers, LLC Ltd Liab Corp, LLP Ltd Liab Part., Minutes of Association, Business License, Fictitious Name, Other (please explain)



Business Owner (Joint 2)

Name			Time at this address Years Months	
Home Phone Number	Cell Phone Number	Work Phone Number	Date of Birth (MM/DD/YYYY)	
Mother's Maiden Name	Country of Citizenship:	City, State & Country of Birth		
Driver's License Number	Social Security Number	Issue Date	Expiration Date	Issuing Authority
Current Employment Status <input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Not Applicable		Business Name/Occupation Title		
Address		City, State Zip	Time at Work Years Months	

Business Owner (Joint 3)

Name			Time at this address Years Months	
Home Phone Number	Cell Phone Number	Work Phone Number	Date of Birth (MM/DD/YYYY)	
Mother's Maiden Name	Country of Citizenship:	City, State & Country of Birth		
Driver's License Number	Social Security Number	Issue Date	Expiration Date	Issuing Authority
Current Employment Status <input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Not Applicable		Business Name/Occupation Title		
Address		City, State Zip	Time at Work Years Months	

Business Owner (Joint 4)

Name			Time at this address Years Months	
Home Phone Number	Cell Phone Number	Work Phone Number	Date of Birth (MM/DD/YYYY)	
Mother's Maiden Name	Country of Citizenship:	City, State & Country of Birth		
Driver's License Number	Social Security Number	Issue Date	Expiration Date	Issuing Authority
Current Employment Status <input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Not Applicable		Business Name/Occupation Title		
Address		City, State Zip	Time at Work Years Months	

Authorized Signers are NOT account owners, but are able to preform all account transactions.

Authorized Signer (1)	Name & Title		Date of Birth (MM/DD/YYYY)
	Driver's License Number & State		SSN
	Address	City, State, ZIP	

Authorized Signer (2)	Name & Title		Date of Birth (MM/DD/YYYY)
	Driver's License Number & State		SSN
	Address	City, State, ZIP	

Authorized Signer (3)	Name & Title		Date of Birth (MM/DD/YYYY)
	Driver's License Number & State		SSN
	Address	City, State, ZIP	

Authorized Signer (4)	Name & Title		Date of Birth (MM/DD/YYYY)
	Driver's License Number & State		SSN
	Address	City, State, ZIP	

Core Business/NAICS Code

Check one for each line:

Gross Annual Sales	<input type="checkbox"/> \$0 - \$50K	<input type="checkbox"/> \$50 - \$150K	<input type="checkbox"/> \$150- \$500K	<input type="checkbox"/> \$500- \$1MM	<input type="checkbox"/> \$1MM+
Number of Employees	<input type="checkbox"/> 0-2	<input type="checkbox"/> 3-9	<input type="checkbox"/> 10-24	<input type="checkbox"/> 25-49	<input type="checkbox"/> 50+
Expected Average Daily Balance	<input type="checkbox"/> under \$2,500	<input type="checkbox"/> \$2,500 - \$10K	<input type="checkbox"/> \$10K - 25K	<input type="checkbox"/> \$25K - \$100K	<input type="checkbox"/> \$100K+
Expected Monthly Wire Activity	<input type="checkbox"/> None	<input type="checkbox"/> 1-2	<input type="checkbox"/> 3-5	<input type="checkbox"/> 6-10	<input type="checkbox"/> Daily
Sources and recipients of wire activity: 1 being entirely domestic, to 5 being entirely international	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

Does your business do any of the following on behalf of your customers: cash checks, exchange currency, electronically transmit money (via Western Union or a similar system) or issue stored-value instruments (traveler's checks, money orders, etc)? yes no

Business Owners Signatures

By signing below you authorize Florida Telco Credit Union to verify the background and identity of the business and its owners using business and consumer credit information.

	Date
	Date
	Date
	Date