



# NEW BUSINESS CUSTOMER INFORMATION FORM

Business Name: \_\_\_\_\_ Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

Business EIN#: \_\_\_\_\_ Company Formation Date: \_\_\_\_\_

## BUSINESS BANKING INFORMATION

Business Bank Name: \_\_\_\_\_ Acct Type: checking savings

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Account Number: \_\_\_\_\_ Routing Number: \_\_\_\_\_

Username: \_\_\_\_\_ Password: \_\_\_\_\_

## PERSONAL BANKING INFORMATION (FOR W-2 PURPOSES)

Business Bank Name: \_\_\_\_\_ Acct Type: checking savings

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Account Number: \_\_\_\_\_ Routing Number: \_\_\_\_\_

Payroll Schedule: Weekly | Bi-Weekly | Monthly

### Employee Information:

W-2 or 1099  
Name: \_\_\_\_\_ Email: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

W-2 or 1099  
Name: \_\_\_\_\_ Email: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

W-2 or 1099  
Name: \_\_\_\_\_ Email: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

W-2 or 1099  
Name: \_\_\_\_\_ Email: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

W-2 or 1099  
Name: \_\_\_\_\_ Email: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

W-2 or 1099  
Name: \_\_\_\_\_ Email: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

W-2 or 1099  
Name: \_\_\_\_\_ Email: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

W-2 or 1099  
Name: \_\_\_\_\_ Email: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

W-2 or 1099  
Name: \_\_\_\_\_ Email: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

W-2 or 1099  
Name: \_\_\_\_\_ Email: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

**\*\*\*If you have additional employees, please use additional sheet to add and submit with this document**