



**Business Information:**

Name \_\_\_\_\_ Employer ID \_\_\_\_\_

Street Address \_\_\_\_\_  
City State Zip

Mailing Address (if different) \_\_\_\_\_  
City State Zip

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**Signers/Title (have each signer complete the personal information sheet): Need Copy of Drivers License**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Where do you currently bank?** \_\_\_\_\_

**Why did you choose our bank?** \_\_\_\_\_

**Other services with FirstCapital Bank that you might be interested in:**

Checks \_\_\_\_\_ Online Banking \_\_\_\_\_ E-statements \_\_\_\_\_

Merchant Services \_\_\_\_\_ Loans \_\_\_\_\_ Safe Deposit Box \_\_\_\_\_

**Required to open an account:**

**Sole Proprietor (DBA):** SSN of owner or EIN (IRS SS4 or 1<sup>st</sup> page of tax return)  
Assumed Name Certificate FILED with County/SOS

**General Partnership:** Proof of EIN: IRS SS4 or 1<sup>st</sup> page of tax return  
Partnership Agreement  
Assumed Name Certificate FILED with County/SOS

**Limited Partnership:** Proof of EIN: IRS SS4 or 1<sup>st</sup> page of tax return  
Formation document FILED with SOS either:  
Certificate of Limited Partnership or Certificate of Formation

**Limited Liability Company (LLC)/Corporation:** Proof of EIN: IRS SS4 or 1<sup>st</sup> page of tax return  
Formation document FILED with SOS either:  
Articles of Organization or Certificate of Formation