



NEW PERSONAL ACCOUNT APPLICATION

IMPORTANT NOTICE FOR EXPEDITING ACCOUNT OPENING

We kindly request the thorough completion of the entire form. These pages are crucial for gathering comprehensive information about the account's transactions and signers. Ensuring complete and accurate details are provided is imperative for meeting regulatory standards and expediting the account setup process.

Please answer the following questions:

1. How did you hear about Paradise Bank? If applicable, who do we have to thank for referring you? _____
2. What is your current profession or industry? If you are retired, please specify your previous profession or industry.

3. Will this be a joint account or individual? _____
4. Will there be any beneficiaries for the account? If yes, please provide Full Legal Name, Social Security Number (SS#), Date of Birth (DOB) and Current Address.

5. What is the purpose of the personal account (example: Household / Living expenses, Savings, other specific purpose).

6. What will be the primary source of funds for this personal account (examples: Salary Paycheck, Investment Returns, Savings, Inheritance or Gift, Loan Proceeds, Business Income, Retirement Distributions, Other)?

7. What balances do you anticipate the account having monthly?

8. Will you need online banking? Yes No
9. Do you own your home? If so, how long? (We offer residential lending) Yes No
10. Will you need an ATM/Debit Card? Yes No

Estimated Monthly Averages

Please estimate to the best of your knowledge the following information:

Transaction Type	Estimated Amount	Estimated Volume
ACH Debits		
Foreign Wires (Out)		
Domestic Wires (Out)		
Cash Withdrawals		
Check Withdrawals		
Total Withdrawals		
ACH Credits		
Foreign Wires (In)		
Domestic Wires (In)		
Cash Deposits		
Check Deposits		
Total Deposits		

Document Checklist:

- ❖ **2 forms of ID - (Clear copy of all signer's ID's)**
- ❖ **3 months of statements from your bank**
- ❖ **Letter of Administration if ESTATE Account & EIN #**
- ❖ **Trust Docs if Trust Account & EIN if IRREVOCABLE TRUST**

Note: An in-depth internet search will be conducted for all clients. Submitting this form does not guarantee account opening.

ACCOUNT OWNER/SIGNER INFORMATION: SIGNER 1					
Name					
Address					
Date of Birth			Social Security No.		
Occupation, if retired previous occupation					
Driver's License #			Issue Date		
Home Phone #			Work Phone #		
Cell Phone No.			E-Mail Address		
Employer Name					
Employer's Address					
<p align="center"><u>Consent and Authorization</u></p> <p><i>By providing the information on this application, you acknowledge and accept that it does not guarantee the opening of an account at Paradise Bank.</i></p> <p><i>Attention: By providing us your information you are authorizing us to run a ChexSystems verification on you and/or the business. I acknowledge and accept by signing below.</i></p>					

X _____
Client Signature

ACCOUNT OWNER/SIGNER INFORMATION: SIGNER 1					
Name					
Address					
Date of Birth			Social Security No.		
Occupation, if retired previous occupation					
Driver's License #			Issue Date		
Home Phone #			Work Phone #		
Cell Phone No.			E-Mail Address		
Employer Name					
Employer's Address					
<p align="center"><u>Consent and Authorization</u></p> <p><i>By providing the information on this application, you acknowledge and accept that it does not guarantee the opening of an account at Paradise Bank.</i></p> <p><i>Attention: By providing us your information you are authorizing us to run a ChexSystems verification on you and/or the business. I acknowledge and accept by signing below.</i></p>					

X _____
Client Signature