



Business New Account Application

Type of Account(s) _____
 Account #(s) _____
 Type of Business
 Corporation _____ LLC _____ Partnership _____
 Sole Prop. _____ Assoc. _____ Trust _____

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means to you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your drivers license or other identifying documents.

By signing this application you authorize Independent Bank of Texas to contact any appropriate third parties for the purpose of verifying any stated information herein or at any time furnished by you to us, and obtaining credit information at any time from any creditors and or credit reporting agencies. We are authorized to answer questions about our credit experience with you. It is understood that the information provided herein may be shared with Independent Bank of Texas or any other subsidiary thereof.

Name of Business _____
 Physical Address _____
 Mailing Address _____
 Tax ID _____ Phone/Fax _____
 Business Purpose _____
 Business Website _____
 How did you hear about our bank? _____

Authorized Signers:

Name _____	Name _____
SSN# _____	SSN# _____
DOB _____	DOB _____
DL#/Exp _____	DL#/Exp _____
Cell # _____	Cell # _____
Email _____	Email _____
Position/Title _____	Position/Title _____
Signature _____	Signature _____
Name _____	Name _____
SSN# _____	SSN# _____
DOB _____	DOB _____
DL#/Exp _____	DL#/Exp _____
Cell # _____	Cell # _____
Email _____	Email _____
Position/Title _____	Position/Title _____
Signature _____	Signature _____

For Bank Use Only

Revised '09

Opened By _____ Verified By _____ Date _____
 Port # _____ Checks _____ Debit Card _____
 CIP Completed _____ Risk Rating _____ Tickler _____
 Notes _____
