



PAYCHECK PROTECTION PROGRAM

NEW CHECKING ACCOUNT AUTHORIZATION

Why a New Account, and is it Required?

You may find it convenient to open a new Business Checking Account at the time you sign your loan documents to keep a separate accounting record of eligible expenses disbursed with Paycheck Protection Program (PPP) loan proceeds. For the purpose of Paycheck Protection Program loan forgiveness, the borrower will need to document the proceeds used for payroll costs in order to determine the amount of forgiveness. Your loan proceeds can be deposited directly to the new account. **A new account is not required.**

How Do I Open a New Business Checking Account?

Simply complete this packet and submit it, along with your Paycheck Protection Program loan application packet and all supporting documents, to your local branch office. We will prepare your new Business Account documents and have you sign them at the same time you sign your loan documents. We will add a title of "PPP Account" to help you easily identify this account. If we need additional information to facilitate the opening of your new Business Account, we will contact you.

Please note: access to all branch lobbies is currently limited. You may submit your PPP loan application packet and the contents of this packet at our drive up facilities, or arrange an appointment with your lender. If you have any questions, please reach out to your local Commercial Lender or Branch Manager.

What Information Should I Provide?

Please reference the documentation checklist in this packet to ensure you submit all required information. If you are a new customer with no existing account relationships with First Bank of Wyoming, we may request additional documentation.

What are the Features of the Account?

Your new account will be a Totally Free Business Checking Account. All details regarding this account can be found on the next page of this packet.

- ◆ Need help finding your local branch? **Branch locations can be found [HERE](#).**
- ◆ Need help finding a lender? **Commercial Lenders and Branch Managers can be found [HERE](#).**

For complete information regarding the Paycheck Protection Program please reference our application packet, which can be found on our website: www.GoFirstBank.com/SmallBusinessRelief



FIRST BANK
OF WYOMING
DIVISION OF GLACIER BANK

www.GoFirstBank.com

MEMBER
FDIC
EQUAL HOUSING
LENDER

PAYCHECK PROTECTION PROGRAM NEW CHECKING ACCOUNT AUTHORIZATION

If you would like to open a new Totally Free Business Checking Account for purposes related to your Paycheck Protection Program loan, please check the box and sign below.

Yes, I want to open a new Business Checking Account.

Signature of Authorized Representative of Applicant

Date

Print Name

Title

Totally Free Business Checking*

The perfect account for most businesses!

- ◆ 3,000 FREE monthly transaction items
- ◆ No minimum balance after account opening
- ◆ No monthly service charge
- ◆ Up to \$10,000 in coin and currency deposits or withdrawals, including change orders per month FREE*
- ◆ FREE Thank You Gift
- ◆ Buy-back of your unused checks and debit cards from another financial institution

Let us know which of the following services you would like to include with your new account:

- FREE VISA® Debit Card
- FREE Online Banking (includes free Mobile Banking access, free Bill Pay and free eStatements)

Let us know if you are interested in the following services, so we can gather more information for you:

- I would like to order checks for this account**
- Cash Management**
Apply for our Cash Management Service available through online banking: ACH Origination, Wire Transfer, Direct Deposit Payroll, and more. All cash management services are subject to approval by First Bank of Wyoming.
- Mobile Remote Deposit Capture**
Apply for access to make mobile business deposits by using our app and the camera on your smart phone.
- Merchant Payment Services**
Become more efficient in operations, expand your customer base, boost your bottom line, and increase your cash flow. Let us have our Merchant Services Expert perform a statement analysis.

*Unless specified otherwise, customer purchases checks. Other fees such as overdraft, nonsufficient funds (NSF) fee, continuous overdraft, etc. may apply. See fee schedule for details. Free gift provided at the time of account opening. \$2.00 per pad/debit card, up to \$10 for checks and debit cards from another financial institution. Your account will be credited at the time the checks/debit cards are presented. Transaction items include all debits, credits and deposited items. If the Totally Free Business Checking account exceeds 3,000 free monthly transaction items, \$10,000 in monthly coin and currency deposits or withdrawals, including change orders, or requires additional regulatory oversight, the account may be changed to Business Analysis Checking which includes additional fees. Minimum opening deposit is only \$50. Ask us for details. Bank rules and regulations apply.



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OF WYOMING
DIVISION OF GLACIER BANK

New Checking Account Authorization
Account Details
Paycheck Protection Program





PAYCHECK PROTECTION PROGRAM

NEW CHECKING ACCOUNT AUTHORIZATION

DOCUMENTATION CHECKLIST

Please prepare the following information/documentation and submit along with your loan application packet:

Existing Customers:

- Certification of Beneficial Ownership of Legal Entities (will be included as part of the PPP loan application packet - do not submit more than one form)
- New Business Customer Form (although you are an existing customer, we are required to update this information when a new account is opened)
- New Consumer Customer Form (one form for each owner/signer on the business account)
- Photo Copy of Valid Identification (Drivers License, Passport, State-Issued ID Card, etc.) for every owner of the business, and every signer on the checking account

New Customers:

- Certification of Beneficial Ownership of Legal Entities (will be included as part of the PPP loan application packet - do not turn in more than one form)
- Business Information Worksheet
- New Business Customer Form
- New Consumer Customer Form (one form for each owner/signer on the business account)
- Photo Copy of Valid Identification (Drivers License, Passport, State-Issued ID Card, etc.) for every owner of the business, and every signer on the checking account
- Proof of existence for your business (not all documents are required for every business type; please provide all applicable documents):
 - Copy of IRS Form SS-4: Assignment of Employer Identification Number
 - Certificate of Assumed Business Name
 - Articles of Incorporation
 - Articles of Organization (LLC)
 - Business License
 - Certificate of Existence
 - Estate Documents
 - LLC Paperwork/Operating Agreement
 - LLP Paperwork
 - Meeting Minutes
 - Partnership Agreement

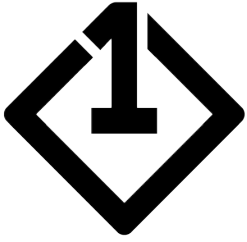
* We may request additional documentation as necessary to verify the identity of the business and/or owners/signers of the business account.



FIRST BANK
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New Checking Account Authorization
Documentation Checklist
Paycheck Protection Program





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Only complete this form if you are a NEW CUSTOMER.

Business Information Worksheet

Business Information:

Registered Business Name _____

Physical Address: _____

City _____ State _____ Zip + 4: _____

Mailing Address: _____

City _____ State _____ Zip + 4 _____

Tax ID/EIN #: _____ - _____

**Businesses with an EIN: please provide a copy of IRS Form SS-4 - Assignment of Employer Identification Number*

Date Established: _____

Business Phone # _____ Fax #: _____

E-mail: _____

Nature of Business: _____

Type of Business:

Sole Proprietor _____ Corporation (for profit) _____ Corporation (non profit) _____

Limited Liability Company _____ Partnership _____

Not for Profit Organization _____

Glacier Family of Banks

New Business Customer			
Full, Legal Name of Entity:		CIF #	
		Acct #	
		Opened By:	
DBA:			
Physical Street Address:		State where Registered or Incorporated:	
Federal EIN#:		Business Phone #:	
E-mail Address:		Cell Phone #:	
Website Address:		Business Fax #:	
Product Requested:		Account Opening Method:	In Person Telephone Written
Description of Entity Documentation Reviewed: (Such as: Articles; IRS letter, Minutes; Trust docs; Personal Rep docs)			
ADD			
Will this account be used for:	<input type="checkbox"/> Administration or Exchange of Virtual Currency <input type="checkbox"/> To Conduct Internet Gambling <input type="checkbox"/> Marijuana Related Activity (income and/or payment is derived from marijuana activity)		
If you checked any of the boxes above, please discuss with a CSR			
Estimated Monthly Averages - Your expected activity on this account. This information assists us in combating fraud.			
Deposits			
Cash	\$		#
Domestic Wires	\$		#
Foreign Wires	\$		#
ACH	\$		#
Withdrawals			
Cash	\$		#
Domestic Wires	\$		#
Foreign Wires	\$		#
ACH	\$		#
Business Acct Purpose:	<input type="checkbox"/> General Operating Funds <input type="checkbox"/> Payroll Only <input type="checkbox"/> Account Payable Only <input type="checkbox"/> Accounts Receivable Only <input type="checkbox"/> Lottery Funds <input type="checkbox"/> Savings General <input type="checkbox"/> Savings - Specific Item <input type="checkbox"/> Savings - Sweep Accounts Funds Only <input type="checkbox"/> Charity <input type="checkbox"/> Escrow Funds - IOLTA <input type="checkbox"/> Landlord/Tenant <input type="checkbox"/> Political Campaign <input type="checkbox"/> Estate Settlement <input type="checkbox"/> Other (describe):		

Glacier Family of Banks

CDD			
Business Ownership Type:	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top; border: none;"> <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Charity <input type="checkbox"/> Domestic Only <input type="checkbox"/> Foreign Only <input type="checkbox"/> Domestic and Foreign <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Irrevocable Trust <input type="checkbox"/> Guardianship (Probate) </td> <td style="width: 50%; vertical-align: top; border: none;"> <input type="checkbox"/> IOTA / IOLA / IOLTA <input type="checkbox"/> CBA (Fiduciary Only) <input type="checkbox"/> Revocable Trust <input type="checkbox"/> Escrow <input type="checkbox"/> Multi-Layered (Complex Ownership) <input type="checkbox"/> Foundation <input type="checkbox"/> 1031 Exchange <input type="checkbox"/> Estate (Probate) <input type="checkbox"/> Lodge, Association, Organization <input type="checkbox"/> Local, State, Federal Government </td> </tr> </table>	<input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Charity <input type="checkbox"/> Domestic Only <input type="checkbox"/> Foreign Only <input type="checkbox"/> Domestic and Foreign <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Irrevocable Trust <input type="checkbox"/> Guardianship (Probate)	<input type="checkbox"/> IOTA / IOLA / IOLTA <input type="checkbox"/> CBA (Fiduciary Only) <input type="checkbox"/> Revocable Trust <input type="checkbox"/> Escrow <input type="checkbox"/> Multi-Layered (Complex Ownership) <input type="checkbox"/> Foundation <input type="checkbox"/> 1031 Exchange <input type="checkbox"/> Estate (Probate) <input type="checkbox"/> Lodge, Association, Organization <input type="checkbox"/> Local, State, Federal Government
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Was this organization created outside of the United States?			
Yes No			
If Yes, What Country?			
If Yes, Will transactions involve countries other than the United States?			
Yes No			
Does the organization have an office outside of the United States?			
Yes No			
What Industry is your business part of? (i.e. NAICS codes)			
What specific products or services does your business provide?			
Define the company's primary source of income:	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top; border: none;"> <input type="checkbox"/> Professional Services <input type="checkbox"/> Product Sales <input type="checkbox"/> Real Estate Investing <input type="checkbox"/> Investing (non-real estate) </td> <td style="width: 50%; vertical-align: top; border: none;"> <input type="checkbox"/> Capital Contributions <input type="checkbox"/> Grants <input type="checkbox"/> Donations <input type="checkbox"/> Other (describe): </td> </tr> </table>	<input type="checkbox"/> Professional Services <input type="checkbox"/> Product Sales <input type="checkbox"/> Real Estate Investing <input type="checkbox"/> Investing (non-real estate)	<input type="checkbox"/> Capital Contributions <input type="checkbox"/> Grants <input type="checkbox"/> Donations <input type="checkbox"/> Other (describe):
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Cash Intensity - Please define what percentage of cash represents total revenue:			
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top; border: none;"> <input type="checkbox"/> Less than 10% <input type="checkbox"/> 11% to 25% <input type="checkbox"/> 26% to 50% </td> <td style="width: 50%; vertical-align: top; border: none;"> <input type="checkbox"/> 51% to 75% <input type="checkbox"/> Greater than 75% </td> </tr> </table>		<input type="checkbox"/> Less than 10% <input type="checkbox"/> 11% to 25% <input type="checkbox"/> 26% to 50%	<input type="checkbox"/> 51% to 75% <input type="checkbox"/> Greater than 75%
<input type="checkbox"/> Less than 10% <input type="checkbox"/> 11% to 25% <input type="checkbox"/> 26% to 50%	<input type="checkbox"/> 51% to 75% <input type="checkbox"/> Greater than 75%		
Does your business process payment for businesses other than your own?			
Yes No			
If Yes, what type of payments?	<input type="checkbox"/> ACH <input type="checkbox"/> Remote Deposit Capture <input type="checkbox"/> Both <input type="checkbox"/> Other (Describe):		
Do you own or operate ATM machines?			
Yes No			
If Yes, How many ATMs?			
If Yes, What is the primary method of ATM servicing and cash replenishment?	<input type="checkbox"/> Cash from business <input type="checkbox"/> Funds from your account with us <input type="checkbox"/> Third party, such as an armored car <input type="checkbox"/> Funds from your account at another bank		
Will you cash checks for your customers?			
Yes No			
If Yes, will you cash checks over \$1,000 per customer per day?			
Yes No			
Will you sell/redeem Money Orders, stored value cards, Cashiers Checks or Travelers Checks for your customers?			
Yes No			
If Yes, Are you an agent for an MSB (Money Service Business)?			
Yes No			
Will you transmit money via Western Union, AMEX, Money Gram or Other?			
Yes No			
Is your business a foreign currency Dealer or Exchanger?			
Yes No			
Are you an MSB or do you provide MSB type services?			
Yes No			
If Yes, Are you registered with FinCEN?			
Yes No			
If Yes, Please provide a copy of your registration. Provided?			
Yes No			
Will you be using Remote Deposit Capture?			
Yes No			

Glacier Family of Banks

New Consumer Customer			
Full, Legal Name:	Last:	CIF #	DOB / /
	First:	Acct #	
	MI:	Opened By:	
DBA:			
Physical Street Address:			
SSN:		Acct Relationship:	Owner Signer
ID Type & #		Home Phone #:	
Expiration Date:		Cell Phone #:	
E-mail Address:		Work Phone #:	
Product Requested:		Account Opening Method:	In Person Telephone Written

CDD	
Do you live in a foreign country?	Yes No
If Yes, What Country?	
Are you a citizen of a foreign country?	Yes No
If Yes, What Country are you a citizen of?	
Are you considered a senior foreign political figure?	Yes No
If No, Are you a close associate or family member of a senior foreign political figure?	
If Yes, What is your relationship to the associated senior foreign political figure?	
Please provide the name of the associated senior foreign political figure:	
If Yes, What position is held?	
In what country do you hold this position?	
Employment Status	
Employed	Yes No
Occupation Category (CSR will assist with this question):	
What is your specific Occupation?	
Please provide the name of your employer:	
Unemployed	Yes No
Previous Occupation Category (CSR will assist with this question):	
Retired:	Yes No
Previous Occupation Category (CSR will assist with this question):	
Please provide the name of your previous employer:	
Other	<input type="checkbox"/> Homemaker <input type="checkbox"/> Living on Inherited Wealth <input type="checkbox"/> Student <input type="checkbox"/> Minor Child
Your Primary Source of Income	<input type="checkbox"/> Employment or self -employment <input type="checkbox"/> Equity position <input type="checkbox"/> Real estate investing <input type="checkbox"/> Retirement <input type="checkbox"/> Non real Estate Investing <input type="checkbox"/> Other (describe): <input type="checkbox"/> Inheritance