

Customer Information Sheet – Consumer

DATE: _____ Employee: _____ CIF: _____

Existing CIF with no changes Date of Review: _____ Reviewed by: _____

Customer Information

Customer Name: _____	Tax ID: _____
Physical Address: _____	Date of Birth: _____
City/State/Zip: _____	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Employer: _____	Occupation: _____
Home Phone: _____	Key Word* _____
Business Phone: _____	*Word, short phrase or numbers you will provide as ID when calling the bank
Personal Cell: _____	
Business Cell: _____	
Email: _____	
Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Class Code: <input type="checkbox"/> Individual <input type="checkbox"/> Trust <input type="checkbox"/> Other _____

Documentation – Refer to CIP Policy for extensive list of acceptable forms of ID

REQUIRED DOCUMENTS	At least one Primary form of ID, unless the person is elderly, disabled, Amish, does not have state issued Drivers License, Identification card, passport or who is a minor. If customer falls within those categories, two forms of ID from the secondary list must be obtained.	
Forms of ID required.		
Obtain copy of ID for retention		
<u>Primary Identification List – U.S. person</u>	<u>Secondary Identification List</u>	See BSA/AML/CIP Procedures for complete list
<input type="checkbox"/> DRIVERS LICENSE	ALTERNATE ID (IF NONE AVAILABLE FROM LEFT COLUMN)	
<input type="checkbox"/> STATE ISSUED ID CARD	2 REQUIRED. ONE MUST CONTAIN NAME AND ADDRESS	
<input type="checkbox"/> ARMED FORCES ID CARD	<input type="checkbox"/> UTILITY BILL, TAX BILL	<input type="checkbox"/> BIRTH CERTIFICATE
<input type="checkbox"/> FEDERAL EMPLOYEE ID CARD	<input type="checkbox"/> FIREARMS PERMIT/LICENSE	<input type="checkbox"/> LETTER FROM ELDER AMISH
<input type="checkbox"/> US ISSUED PASSPORT	<input type="checkbox"/> EMPLOYER ID CARD	<input type="checkbox"/> UNEXPIRED CAR REGISTRATION
<input type="checkbox"/> OTHER ID _____	<input type="checkbox"/> STUDENT ID CARD	<input type="checkbox"/> MARRIAGE LICENSE
<small>*see CIP Policy for complete list</small>	<input type="checkbox"/> SOCIAL SECURITY CARD	<input type="checkbox"/> SELECTIVE SERVICE CARD
<u>Primary Identification List - non-U.S. person</u>	<input type="checkbox"/> MEDICAL INSURANCE CARD	<input type="checkbox"/> VOTER REGISTRATION CARD
<input type="checkbox"/> PASSPORT (PHOTO, NUMBER & COUNTRY REQ)	<input type="checkbox"/> MEDICARE/MEDICAIDE CARD	<input type="checkbox"/> FEDERAL TAX RETURN/W2
<input type="checkbox"/> ALIEN IDENTIFICATION CARD	<input type="checkbox"/> CREDIT CARD	
<input type="checkbox"/> FIDUCIARY (Trusts, Custodial, Rep Payee, etc)	<input type="checkbox"/> TRUST AGREEMENT	<input type="checkbox"/> COURT ORDERED GUARDIANSHIP
	<input type="checkbox"/> REP PAYEE APPOINTMENT (SSA)	<input type="checkbox"/> VETERANS AFFAIRS (APPOINTED FIDUCIARY)

Accounts

ACCOUNT TYPE _____	ACCOUNT TYPE _____
ACCOUNT NO. _____	ACCOUNT NO. _____
RELATIONSHIP _____	RELATIONSHIP _____
ACCOUNT TYPE _____	ACCOUNT TYPE _____
ACCOUNT NO. _____	ACCOUNT NO. _____
RELATIONSHIP _____	RELATIONSHIP _____

Services

<input type="checkbox"/> Debit Card	<input type="checkbox"/> Online Banking	<input type="checkbox"/> e-Statements	<input type="checkbox"/> Bill Pay	<input type="checkbox"/> Mobile Deposit	<input type="checkbox"/> Overdraft
<input type="checkbox"/> Checks	<input type="checkbox"/> Direct Deposit	<input type="checkbox"/> Mortgage	<input type="checkbox"/> Brokerage	<input type="checkbox"/> Insurance	<input type="checkbox"/> O/D Protection