

Prepare for a smooth application process. Here are the steps.

**1. Get your paperwork ready.**

For all business loans, be prepared to provide the following documents if asked:

- Most recent tax return (business and personal)
- Personal financial summary
- Current balance sheet
- Current profit and loss
- Current debt schedule
- Entity documents

For a vehicle or equipment loan, you will also need:

- Collateral description (include signed purchase order and/or bill of sale)
- Title documents
- Insurance certificate
- Collateral valuation (upon request)
- Odometer statement (if applicable)

**2. Are you applying for a loan of \$50,000 or more?** If so, please contact a BECU Business Specialist ahead of time. Visit <https://www.becu.org/forms/business-services-contact-us> or call 800-704-8080.

**3. If you're not already a BECU Business member, apply for membership.**

To apply online, visit <https://www.becu.org/business-banking/business-membership>.

To apply in person:

- Refer to the Business Membership and Account Opening Checklist\*.
- Complete the Business Membership Application\*.
- Return the application in person at any BECU location, or schedule a video banking appointment at <https://www.becu.org/support/video-banking>.

\* The checklist and application are available at <https://www.becu.org/support/business-forms> or at any BECU location.

**4. Apply for your loan.**

Use this form to apply for one or more loans for your business.

- All form fields in this application are required unless otherwise noted.
- Questions? Contact us at **844-232-8562**.

You can expect a loan decision, usually by mail, within 7 to 10 business days of BECU's receipt of this application. We may contact you for additional information.

## Step 1. What are you applying for? (Select one or more)

Term / Equipment Loan     Business Vehicle Loan     Line of Credit: \$50,000 or more\*

\*To apply for a smaller line of credit, use the Small Business LOC Application and Agreement form.

Amount	Collateral
\$	

### Credit Purpose

## Step 2. Business information

Enter the information below exactly as it appears on your official business registration with the secretary of state and/or department of revenue.

### Is this business currently a BECU Business member?

Yes  
 No

**Business Name** (full legal name of the business)

**Doing Business As (DBA) or Trade Name** (if applicable)

### Federal Tax Identification Number (TIN)

Enter the TIN you use to file your business taxes. Enter numbers only, no dashes.

### Unified Business Identifier (UBI) or State Business Registry Number

### Business Phone

(numbers only, no dashes)

### Email Address for the Business

### Business Structure

Sole Proprietorship     Partnership     Corporation     LLC

### Business Type / Industry

**Describe your business in a few words.**

## NAICS\* Code

\*NAICS (North American Industry Classification System) is the standard used by Federal Statistical Agencies to classify business establishments. It is a six-digit code that appears on your Federal Tax return or Schedule C. You can search for your NAICS code on the [naics.com](http://naics.com) website.

Date Business Established (mm/dd/yyyy)	Date Current Ownership Established (mm/dd/yyyy)	Number of Workers (Do not include owners)
<b>Prior Fiscal Year Gross Revenue*</b> \$	<b>Projected Annual Revenue for Current Year</b> \$	<b>Projected Annual Net Income for Current Year</b> \$

\**Prior fiscal year gross revenue* is the amount of money the business earned before subtracting taxes and other expenses for the previous fiscal year. If the business has no gross annual revenue to report (for example, a startup, a new line of business, or a business with a change in structure or ownership), enter 0.

## Is this business a nonprofit organization?

Yes  
 No

## Step 3. Business address

### Business location (must be a physical address in the United States)

Federal regulations require us to collect the address of a physical location (not a PO Box) within the United States where you actually conduct business. We will mail important correspondence and documents to the address listed here, unless you provide a different mailing address.

#### Street Address

City

State

ZIP Code

### Mailing address (optional)

If you have a different preferred mailing address, provide it here. If you list an address in this section, we will mail important correspondence and documents to this address.

#### Mailing Address

City

State

ZIP Code

## Step 4. Business owners / guarantors

This section must meet **both** of the following requirements:

1. Each and every person who owns **25% or more** of the business is listed, **and**
2. The owners listed **add up to at least 51%** of the business ownership. To reach 51%, you may need to list some owners who own less than 25% each.

All owners listed will be personal guarantors of the loan.

Federal regulations require this application to list each individual who owns 25% or more of the business. (Nonprofit organizations are not required to list principal owners.)

### Business owner / guarantor 1

First Name	Middle Name (optional)	Last Name	Suffix
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Social Security Number (SSN) (9 digits, numbers only, no dashes)	Date of Birth (mm/dd/yyyy)
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Personal Address (must be in the United States)
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City	State	ZIP Code
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**Email Address for Owner / Guarantor 1.** Provide the address that you use to send and receive business email. Shortly after submitting this application, you may receive a demographic survey via email from BECU. We are required by law to send the survey under certain circumstances. We encourage you to complete the survey, but you are not required to do so.

Ownership Stake %	Annual Outside Income*, Gross (optional) \$
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\**Outside income* is income derived from a source outside of the business itself, which the business owner / guarantor would like considered as a basis for repaying this obligation.

- List only separate income or community property income under your control.
- Outside income from alimony, child support, or separate maintenance payments need not be revealed if you do not wish BECU to consider it as a basis for repaying this obligation.

### Business owner / guarantor 2

First Name	Middle Name (optional)	Last Name	Suffix
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Social Security Number (SSN) (9 digits, numbers only, no dashes)	Date of Birth (mm/dd/yyyy)
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**Personal Address** (must be in the United States)

City	State	ZIP Code
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**Email Address for Owner / Guarantor 2.** Provide the address that you use to send and receive business email. Shortly after submitting this application, you may receive a demographic survey via email from BECU. We are required by law to send the survey under certain circumstances. We encourage you to complete the survey, but you are not required to do so.

Ownership Stake	Annual Outside Income*, Gross (optional)		
%	\$		
<i>*Outside income</i> is income derived from a source outside of the business itself, which the business owner / guarantor would like considered as a basis for repaying this obligation.			
<ul style="list-style-type: none"><li>• List only separate income or community property income under your control.</li><li>• Outside income from alimony, child support, or separate maintenance payments need not be revealed if you do not wish BECU to consider it as a basis for repaying this obligation.</li></ul>			

**Business owner / guarantor 3**

First Name	Middle Name (optional)	Last Name	Suffix
Social Security Number (SSN) (9 digits, numbers only, no dashes)		Date of Birth (mm/dd/yyyy)	

**Personal Address** (must be in the United States)

City	State	ZIP Code
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**Email Address for Owner / Guarantor 3.** Provide the address that you use to send and receive business email. Shortly after submitting this application, you may receive a demographic survey via email from BECU. We are required by law to send the survey under certain circumstances. We encourage you to complete the survey, but you are not required to do so.

Ownership Stake	Annual Outside Income*, Gross (optional)		
%	\$		
<i>*Outside income</i> is income derived from a source outside of the business itself, which the business owner / guarantor would like considered as a basis for repaying this obligation.			
<ul style="list-style-type: none"><li>• List only separate income or community property income under your control.</li><li>• Outside income from alimony, child support, or separate maintenance payments need not be revealed if you do not wish BECU to consider it as a basis for repaying this obligation.</li></ul>			

## Business owner / guarantor 4

First Name	Middle Name (optional)	Last Name	Suffix
Social Security Number (SSN) (9 digits, numbers only, no dashes)		Date of Birth (mm/dd/yyyy)	
Personal Address (must be in the United States)			
City		State	ZIP Code

**Email Address for Owner / Guarantor 4.** Provide the address that you use to send and receive business email. Shortly after submitting this application, you may receive a demographic survey via email from BECU. We are required by law to send the survey under certain circumstances. We encourage you to complete the survey, but you are not required to do so.

Ownership Stake	Annual Outside Income*, Gross (optional)
%	\$

\**Outside income* is income derived from a source outside of the business itself, which the business owner / guarantor would like considered as a basis for repaying this obligation.

- List only separate income or community property income under your control.
- Outside income from alimony, child support, or separate maintenance payments need not be revealed if you do not wish BECU to consider it as a basis for repaying this obligation.

## Step 5. Automatic payment from a BECU business account (required for Line of Credit, optional for other loans)

**Important:** By designating a deposit account and electing a payment option, you certify that the deposit account is established primarily for business purposes and not personal, family, or household purposes, and you authorize BECU to transfer the **minimum payment due** from the designated deposit account on each payment due date.

BECU Business Account Number (if known, 10 digits)

## Step 6. Agreements

**All Business Owners / Guarantors listed in Step 4 must sign the application below.**

By signing below, you (Business Owner / Guarantor) are signing for the Business as an acting officer of the Business and individually as a Guarantor. By signing below, you certify that the information contained herein is complete and accurate. Your signature below further authorizes BECU to make inquiries for use in evaluating your applications and conducting periodic reviews of your BECU accounts subsequently, assessing your personal creditworthiness and the creditworthiness of the Business, including ordering a consumer credit report and a business credit report, and you instruct BECU to obtain and use such information in deciding whether to notify you about other products and services from time to time. You certify that the execution, delivery, and performance of this Application has been authorized by all necessary corporate action by the Business. You agree that credit accounts will be used primarily for business purposes, and not personal, family, or household purposes.

**Oral agreements or oral commitments to loan money, extend credit, or to forbear from enforcing repayment of a debt are not enforceable under Washington law.**

<b>Signature of Business Owner / Guarantor (1)</b>	<b>Printed Name</b>	<b>Date (mm/dd/yyyy)</b>
<b>Signature of Business Owner / Guarantor (2)</b>	<b>Printed Name</b>	<b>Date (mm/dd/yyyy)</b>
<b>Signature of Business Owner / Guarantor (3)</b>	<b>Printed Name</b>	<b>Date (mm/dd/yyyy)</b>
<b>Signature of Business Owner / Guarantor (4)</b>	<b>Printed Name</b>	<b>Date (mm/dd/yyyy)</b>

If your application for credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain this statement, please contact BECU Business Services, P.O. Box 97050 Seattle, WA 98124 or **206-812-5140** within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of your request for this statement.

If form is not submitted electronically, please return completed and signed form to a BECU location.

## For BECU use only (optional)

<b>Representative</b>	<b>Employee ID #</b>	<b>Location</b>
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You may apply for credit in your name alone, regardless of marital status. Check your marital status below only if you live in a community property state, such as Washington. You must answer the questions about your spouse only if you are married and you live in a community property state. If you are married and live in a community property state, BECU will assume that all assets, income, and debts are community property unless you indicate otherwise.

### Step 1. Marital status

 Married Unmarried Separated

### Step 2. Individual information

**Full Name****Street Address** (physical address required)**City****State / Province****Zip / Postal****Country****Email address****Phone****Date of Birth****SSN/TIN (9 digits)****Job title****Employer name****Employment start date**

### Step 3. Joint information

**Full Name****Street Address** (physical address required)**City****State / Province****Zip / Postal****Country****Email address****Phone****Date of Birth****SSN/TIN (9 digits)****Job title****Employer name****Employment start date**

### Step 4. Assets

Complete schedules first. Refer to the details in Schedule (X), or the Schedule of Real Estate Owned (SREO) form to provide the information below.

(A) Cash in BECU	(SREO form) <b>Real Estate Owned</b>	
(A) Cash on Hand, in Banks and Credit Unions	(E) Notes and Accounts Receivable	
(A) IRA and Tax Deferred Accounts	(E) Ownership Interest in Business	
(B) Marketable Securities/Stocks and Bonds	(E) Other Assets	
(C) Cash Value of Life Insurance	(F) Personal Property	
	<b>Total of Assets</b>	

## Step 5. Liabilities

Complete schedules first. Refer to the details in Schedule (X) to provide the information below.

(C) Loans on Life Insurance Policies	(G) Other Liabilities Due	
(D) Real Estate Mortgages Payable	(G) Taxes Due	
(G) Contract Accounts Payable	<b>Total Liabilities</b>	
(G) Credit Cards Payable	Net Worth (Total Assets Minus Total Liabilities)	
(G) Notes Due to Relatives and Friends	<b>Total of Liabilities and Net Worth</b>	
(G) Notes, Loans, and Accounts Payable		

## Step 6. Annual income

Alimony, child support, or separate maintenance income need not be revealed if you do not wish BECU to consider it as a basis for repaying this obligation.

<b>Salary, Bonus, and Commissions</b>	
<b>Net Investment Income</b>	
<b>Rental and Lease Income (Net)</b>	
<b>Other Income (itemize)</b>	
<b>Joint Applicant Salary, Bonus, and Commissions (if applicable)</b>	
<b>Joint Applicant Other Income (itemize, if applicable)</b>	

<b>Total of Annual Income</b>
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## Step 7. Estimate of annual expenses

<b>Income Taxes</b>		<b>Insurance Premiums</b>	
<b>Other Taxes</b>		<b>Mortgage Payments</b>	
		<b>Rent Payable</b>	
<b>Other Expenses</b>			
<b>Other Expenses (2)</b>			
<b>Other Expenses (3)</b>			
<b>Other Expenses (4)</b>			
<b>Total of Estimated Annual Expenses</b>			

## Step 8. General information

Are any assets pledged other than described in the schedules below?	Are you partner or officer in any other venture?
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Are you defendant in any suits or legal actions?	Date of most recent Income Tax return filed:
<input type="radio"/> Yes <input type="radio"/> No	
Have you ever been declared bankrupt in the last 10 years?	
<input type="radio"/> Yes <input type="radio"/> No	

## Step 9. Contingent liabilities

Are you an endorser, co-signer, or guarantor on additional loans or liabilities?	Do you have any contingent liabilities arising from legal claims?
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Do you have any liability to repay any other leases or contracts?	Do you have any Federal or State past due income taxes?
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Other	
<input type="radio"/> Yes	
<input type="radio"/> No	

## Step 10. Schedule A: Cash, savings accounts, CDs, and IRA accounts

**Name of Bank, Credit Union, or Brokerage**

Type of Account	Type of Ownership	Account Balance
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**Name of Bank, Credit Union, or Brokerage**

Type of Account	Type of Ownership	Account Balance
-----------------	-------------------	-----------------

**Name of Bank, Credit Union, or Brokerage**

Type of Account	Type of Ownership	Account Balance
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**Total of Cash, Savings accounts, CDs, and IRA accounts**



### Document Types

- Bank or Credit Union Statements

## Step 11. Schedule B: Securities owned

(including the U.S. Government Bonds and all other stocks and bonds)

Face Value Bonds or Number of the Bonds	Type of Ownership
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**Description** (indicate those not registered in your name)

Cost		Market Value Not Readily Marketable	
Market Value (U.S. Gov. section)		Amount Pledged To Secured	
Market Value (Marketable section)			
Face Value Bonds or Number of the Bonds	Type of Ownership		

**Description** (indicate those not registered in your name)

<b>Cost</b>		<b>Market Value Not Readily Marketable</b>	
<b>Market Value (U.S. Gov. section)</b>		<b>Amount Pledged To Secured</b>	
<b>Market Value (Marketable section)</b>			
<b>Face Value Bonds or Number of the Bonds</b>		<b>Type of Ownership</b>	

**Description** (indicate those not registered in your name)

<b>Cost</b>		<b>Market Value Not Readily Marketable</b>	
<b>Market Value (U.S. Gov. section)</b>		<b>Amount Pledged To Secured</b>	
<b>Market Value (Marketable section)</b>			
<b>Total of Market Value</b>		<b>Total of Market Value Marketable</b>	<b>Total of Market Value Not Readily Marketable</b>



**Document Types**

- Attach Brokerage Statements

## Step 12. Schedule C: Life insurance

List only those Policies that you own.

<b>Company</b>		
<b>Face Amount</b>		<b>Loans</b>
<b>Cash Surrender Value</b>		
<b>Policy Pledged as Collateral</b>		<b>Beneficiary</b>
<b>Company</b>		
<b>Face Amount</b>		<b>Loans</b>
<b>Cash Surrender Value</b>		

Policy Pledged as Collateral	Beneficiary
Total of Cash Surrender Value	Total of Loans


**Document Types**

- Attach Itemization

### Step 13. Schedule D: Other Assets

Asset Description	Value
Asset Description	Value
Asset Description	Value
<b>Total of Asset Value</b>	


**Document Types**

- Attach Itemization

### Step 14. Schedule E: Personal property

(indicate percent of your Ownership Interest)

Description	Percent	Date When New
Cost When New	Loan Balance Due on Property	
Value Today		
Description	Percent	Date When New
Cost When New	Loan Balance Due on Property	
Value Today		
Description	Percent	Date When New
Cost When New	Loan Balance Due on Property	

<b>Value Today</b>	
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**Total of Value Today**



**Document Types**

- Attach Itemization

## Step 15. Schedule F: Loans, Installment Loans, Credit Lines, and Notes Payable

<b>Payable To</b>	<b>Joint on Account</b>	
<b>Due Date</b>	<b>Balance</b>	<b>Monthly Payment</b>
<b>Collateral (if any)</b>		
<b>Payable To</b>	<b>Joint on Account</b>	
<b>Due Date</b>	<b>Balance</b>	<b>Monthly Payment</b>
<b>Collateral (if any)</b>		
<b>Payable To</b>	<b>Joint on Account</b>	
<b>Due Date</b>	<b>Balance</b>	<b>Monthly Payment</b>
<b>Collateral (if any)</b>		
<b>Payable To</b>	<b>Joint on Account</b>	
<b>Due Date</b>	<b>Balance</b>	<b>Monthly Payment</b>
<b>Collateral (if any)</b>		

Total of Balance	Total of Monthly Payment



#### Document Types

- Attach Itemization

### Step 16. Acknowledgement and consent

This information and the information provided on all accompanying financial statements and schedules are provided for the purpose of obtaining credit. You acknowledge that representations made in this Statement will be relied on by BECU in its decision to grant such credit. This Statement is true and correct in every detail and accurately represents your financial condition on the date given below. BECU is authorized to make all inquiries necessary to verify the accuracy of the information contained herein and to determine the creditworthiness of the undersigned. You will promptly notify BECU of any subsequent changes, which would affect the accuracy of this Statement. BECU is further authorized to answer any questions about Creditors experience with you. You are aware that any knowing or willful false statements regarding the value of the above property for purposes of influencing the actions of Creditors can be a violation of federal law 18 U.S.C., section 1014 and may result in fine, imprisonment or both. You also, authorize BECU to investigate your personal credit history as part of the above referenced Business Loan Application. Oral agreements or oral commitments to loan money, extend credit, or to forbear from enforcing repayment of a debt are not enforceable under Washington law.

**By signing below, you declare that you have read and understand the above statement.**

Signature #1	Printed Name	Date (MM/DD/YYYY)
Signature #2	Printed Name	Date (MM/DD/YYYY)

If you are guaranteeing this credit jointly, both guarantors must initial the box below.

**We intend to jointly guarantee this credit**

Guarantor Initials	Guarantor Initials

**SCHEDULE OF REAL ESTATE OWNED**

	Property Address, City, State, Zip	Property Type*	Name(s) in Which Property is Titled**	% Owned	Gross # of Units	# Units Occupied	Purchase Date	Original Cost	Current Market Value
1									
2									
3									
4									
5									
6									

\*Property Types: CML=Commercial; SF=Single Family 1-4 Units; MF=Multi-Family 5+ Units

\*\*If property is co-owned, provide names of all owners.

## SCHEDULE OF REAL ESTATE OWNED

	Rent	Expenses	NOI	Balance of Outstanding Mortgages/HELOCs	Maturity Month/ Year	Recourse	Name of Lender(s)	1 <sup>st</sup> Mortgage Monthly Payment	Taxes/Insurance included? (Y/N)
1									
2									
3									
4									
5									
6									

# Certification Regarding Beneficial Owners of a Legal Entity

All form fields are required unless otherwise noted.

**Sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf do not need to complete this form.**

Questions? Contact BECU at **800-704-8080**.

## Step 1. Purpose of this form

Federal regulations require financial institutions to obtain, verify, and record certain information, some of which is collected on this form.

Legal Entities can be used to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a Legal Entity (the Beneficial Owners and the Control Person) helps law enforcement investigate and prosecute these crimes.

## Step 2. Legal Entity information

### Legal Entity Name

Provide the full legal name of the business as registered with the secretary of state or department of revenue, not a trade name or “doing business as” (DBA) name.

### Legal Entity Type

 Partnership Corporation LLC Club

### Federal Tax Identification Number (TIN)

Enter the TIN the Legal Entity uses to file its business taxes.

### Street Address (must be a physical address in the United States)

City

State

ZIP Code

Phone (numbers only, no dashes)

## Step 3. Beneficial owner(s) with 25% or more ownership

A Beneficial Owner is not the same as a beneficiary. A Beneficial Owner is each individual who owns, directly or indirectly, 25% or more of the equity interests of the Legal Entity. (For example, each natural person that owns 25% or more of the shares of a corporation is a Beneficial Owner.)

You must list **all** Beneficial Owners with 25% or more ownership unless there are no such owners, in which case you may check the box stating there are no Beneficial Owners.

There are no Beneficial Owners with 25% or more ownership. Proceed to Step 4.

### Beneficial owner 1

First Name	Middle Name (optional)	Last Name	Suffix
Role / Position in the Business (for example, Partner, Officer, Member, Owner, Manager)		Ownership Stake	Date of Birth (mm/dd/yyyy) %

### Physical Home Address

City	State / Province
ZIP / Postal Code	Country

### Social Security Number, ITIN, or Alternate Identification

- Social Security number: \_\_\_\_\_ (9 digits, numbers only, no dashes)
- Individual Tax ID Number (ITIN): \_\_\_\_\_ (9 digits, numbers only, no dashes)
- This Beneficial Owner does not have a Social Security number or ITIN. Provide the number, type, and country of an alternative identification document.\*

ID Number	ID Type	Country of Issuance
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\*The alternative identification must be a document evidencing nationality or residence and bearing a photograph or similar safeguard, such as a passport or alien identification card.

## Beneficial owner 2

First Name	Middle Name (optional)	Last Name	Suffix
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Role / Position in the Business (for example, Partner, Officer, Member, Owner, Manager)	Ownership Stake %	Date of Birth (mm/dd/yyyy)
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### Physical Home Address

City	State / Province
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ZIP / Postal Code	Country
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### Social Security Number, ITIN, or Alternate Identification

- Social Security number: \_\_\_\_\_ (9 digits, numbers only, no dashes)
- Individual Tax ID Number (ITIN): \_\_\_\_\_ (9 digits, numbers only, no dashes)
- This Beneficial Owner does not have a Social Security number or ITIN. Provide the number, type, and country of an alternative identification document.\*

ID Number	ID Type	Country of Issuance
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\*The alternative identification must be a document evidencing nationality or residence and bearing a photograph or similar safeguard, such as a passport or alien identification card.

## Beneficial owner 3

First Name	Middle Name (optional)	Last Name	Suffix
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Role / Position in the Business (for example, Partner, Officer, Member, Owner, Manager)	Ownership Stake %	Date of Birth (mm/dd/yyyy)
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### Physical Home Address

City	State / Province
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ZIP / Postal Code	Country
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**Social Security Number, ITIN, or Alternate Identification**

Social Security number: \_\_\_\_\_ (9 digits, numbers only, no dashes)

Individual Tax ID Number (ITIN): \_\_\_\_\_ (9 digits, numbers only, no dashes)

This Beneficial Owner does not have a Social Security number or ITIN. Provide the number, type, and country of an alternative identification document.\*

ID Number	ID Type	Country of Issuance

\*The alternative identification must be a document evidencing nationality or residence and bearing a photograph or similar safeguard, such as a passport or alien identification card.

**Beneficial owner 4**

First Name	Middle Name (optional)	Last Name	Suffix

Role / Position in the Business (for example, Partner, Officer, Member, Owner, Manager)	Ownership Stake	Date of Birth (mm/dd/yyyy)

**Physical Home Address**

City	State / Province

ZIP / Postal Code	Country

**Social Security Number, ITIN, or Alternate Identification**

Social Security number: \_\_\_\_\_ (9 digits, numbers only, no dashes)

Individual Tax ID Number (ITIN): \_\_\_\_\_ (9 digits, numbers only, no dashes)

This Beneficial Owner does not have a Social Security number or ITIN. Provide the number, type, and country of an alternative identification document.\*

ID Number	ID Type	Country of Issuance

\*The alternative identification must be a document evidencing nationality or residence and bearing a photograph or similar safeguard, such as a passport or alien identification card.

## Step 4. Control Person

### Who is a Control Person?

You must designate as the Control Person an individual with significant responsibility to control, manage, or direct the Legal Entity. This person does **not** need to be an owner of the Legal Entity, but they must be a high-level official in the legal entity, who is responsible for how the organization is run, and who will have access to a range of information concerning day-to-day operations.

### What if this person was already listed in Step 3?

If an individual meets the definition of both Beneficial Owner with 25% or more ownership and Control Person, you must list them in both sections.

First Name	Middle Name (optional)	Last Name	Suffix
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Role / Position in the Business (for example, Partner, Officer, Member, Owner, Manager)	Date of Birth (mm/dd/yyyy)
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Physical Home Address	
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City	State / Province
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ZIP / Postal Code	Country
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### Social Security Number, ITIN, or Alternate Identification

- Social Security number: \_\_\_\_\_ (9 digits, numbers only, no dashes).
- Individual Tax ID Number (ITIN): \_\_\_\_\_ (9 digits, numbers only, no dashes).
- The Control Person does not have a Social Security number or ITIN. Provide the number, type, and country of an alternative identification document.\*

ID Number	ID Type	Country of Issuance
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\*The alternative identification must be a document evidencing nationality or residence and bearing a photograph or similar safeguard, such as a passport or alien identification card.

## Step 5. Information about the person completing and signing this form

### Who is completing and signing this form?

An Owner listed in Step 3 or the Control Person listed in Step 4, above. Proceed to Step 6.

Someone else. Please provide your details below.

First Name	Middle Name (optional)	Last Name	Suffix
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### Role / Position in the Business

### Social Security Number or ITIN (or Alternate Identification)

Social Security number: \_\_\_\_\_ (enter 9 digits, numbers only, no dashes).

Individual Tax ID Number (ITIN): \_\_\_\_\_ (enter 9 digits, numbers only, no dashes).

I do not have a Social Security number or ITIN. Provide the number, type, and country of an alternative identification document.\*

ID Number	ID Type	Country of Issuance
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\*The alternative identification must be a document evidencing nationality or residence and bearing a photograph or similar safeguard, such as a passport or alien identification card.

## Step 6. Certification and agreement

By signing below, I agree to the following:

- I authorize BECU to access the FinCEN beneficial ownership database (<https://www.fincen.gov/boi>) to validate the Legal Entity's beneficial ownership information.
- If the Legal Entity has a BECU deposit account or loan with an automatic renewal feature, I agree that the account holder will notify BECU of any changes to the information provided on this form. If BECU receives no notification of any changes, BECU will treat the automatic renewal as certification that the information is current and accurate.
- I certify, to the best of my knowledge, that the information provided on this form is complete and correct.

Signature	Printed Name	Date (mm/dd/yyyy)
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## For BECU use only

ID verified      Org Number: \_\_\_\_\_