

BUSINESS LOAN APPLICATION CHECKLIST

Help us process your loan application faster by providing a few things up front:

- Print a BECU Business Loan Application online at becu.org/getstarted, complete with information indicated below and return to any BECU location

If you're not already a BECU Business Member, please:

- Refer to the Business Membership and Account Opening Checklist
- Complete and return the Business Membership Application

(Both are available online, or at any BECU location.)

For a vehicle or equipment Loan, we will need:

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

For loans greater than \$50,000, the following financial information needs to be included:

- Business plan (include 2-year financial forecast)
- Interim business financial statements (current within 60 days if applying for \$100,000 or more)
- Business IRS tax returns (for the prior 3 years)
- Business financial statements (for the prior 2 years; 3 years if applying for \$100,000 or more)
- Personal financial statements (current within 60 days for each 25% or more owner/guarantor)
- Personal IRS tax returns (for the prior 2 years for each 25% or more Owner/Guarantor)

Thank you for applying for business credit at BECU. A Business Services representative may contact you to review your borrowing needs after we've reviewed your submitted application. We may request additional information to complete the credit review process.

If you have any questions, please contact a BECU Business Services representative at **800.233.2328**.

BUSINESS LOAN APPLICATION



Welcome to Boeing Employees' Credit Union (BECU). All information is required unless otherwise noted. Please complete application, sign it in ink, and bring to a BECU location to apply. If you have any questions contact 800.233.2328, ext. 5140.

1. Product

| | | |
|--|------------|---------|
| TYPE OF REQUEST (check all that apply) <input type="checkbox"/> Term Loan <input type="checkbox"/> Business Vehicle <input type="checkbox"/> Commercial Real Estate <input type="checkbox"/> Line of Credit \$50,000 or greater | | |
| AMOUNT \$ | COLLATERAL | PURPOSE |

2. Business Information

| | | | |
|---|-------------------------|---|-------------------------|
| BUSINESS / TRADE NAME (and DBA, if applicable) | | | |
| DATE BUSINESS ESTABLISHED (MM/DD/YYYY) | | DATE CURRENT OWNERSHIP ESTABLISHED (MM/DD/YYYY) | |
| FEDERAL TAX IDENTIFICATION NUMBER (EIN OR SSN) | | STATE UNIFIED BUSINESS IDENTIFIER (UBI) NUMBER | |
| BUSINESS STRUCTURE <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC | | | |
| BUSINESS TYPE / INDUSTRY | NAICS CODE * | ANNUAL SALES \$ | ANNUAL NET INCOME \$ |
| DESCRIBE YOUR BUSINESS: | | | |
| BUSINESS LOCATION / STREET ADDRESS | | CITY | STATE ZIP CODE |
| MAILING ADDRESS (if different from above) | | CITY | STATE ZIP CODE |
| BUSINESS PHONE | BUSINESS FAX (optional) | EMAIL ADDRESS (optional) | |
| By providing your email address, you agree that BECU may send marketing information regarding products and services to you electronically. | | | |
| *North American Industry Classification System is the standard used by Federal Statistic Agencies to classify business establishments. It appears on your Federal Tax return or Schedule C. | | | |

3. Business Owner / Guarantor

Please list all owners with ownership of 25% or greater. All owners listed must sign application as Guarantors. Outside Income is income that the Business Owner/Guarantor would like considered as a basis for repaying this obligation and is derived from a source outside of the business itself. 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 NAME (1) | | Title | BUSINESS OWNER/GUARANTOR NAME (2) | | Title |
| SOCIAL SECURITY NUMBER (SSN) | | | SOCIAL SECURITY NUMBER (SSN) | | |
| DATE OF BIRTH | OWNERSHIP % | OUTSIDE INCOME (See Note below) \$ | DATE OF BIRTH | OWNERSHIP % | OUTSIDE INCOME (See Note below) \$ |
| PERSONAL ADDRESS | | | PERSONAL ADDRESS | | |
| CITY | STATE | ZIP CODE | CITY | STATE | ZIP CODE |
| BUSINESS OWNER/GUARANTOR NAME (3) | | Title | BUSINESS OWNER/GUARANTOR NAME (4) | | Title |
| SOCIAL SECURITY NUMBER (SSN) | | | SOCIAL SECURITY NUMBER (SSN) | | |
| DATE OF BIRTH | OWNERSHIP % | OUTSIDE INCOME (See Note below) \$ | DATE OF BIRTH | OWNERSHIP % | OUTSIDE INCOME (See Note below) \$ |
| PERSONAL ADDRESS | | | PERSONAL ADDRESS | | |
| CITY | STATE | ZIP CODE | CITY | STATE | ZIP CODE |

Business Financial Summary

| | | | |
|--|---------------|--|---------------|
| <input type="checkbox"/> Financial Statement Submitted with this Summary | | <input type="checkbox"/> Current Financial Statement on File with BECU | |
| Assets | Amount | Liabilities | Amount |
| Cash and Equivalents | \$ | Current Liabilities (A/P, LOC, Accruals) | \$ |
| Account/Trade Receivables | \$ | Long Term Liabilities (Equipment, Vehicles, RE) | \$ |
| Inventory | \$ | Notes Payable to Owners | \$ |
| Fixed Assets | \$ | Total Liabilities | \$ |
| Other (Intangibles) | \$ | Net Worth (total assets minus total liabilities) | \$ |
| Total Assets | \$ | Total Liabilities and Net Worth | \$ |

Business Income Summary

| | Current Year to Date | Fiscal Year End: | Fiscal Year End: | Fiscal Year End: |
|---------------------------|----------------------|------------------|------------------|------------------|
| Number of Months | | | | |
| Sales | \$ | \$ | | \$ |
| Net Income | \$ | \$ | | \$ |
| Depreciation/Amortization | \$ | \$ | | \$ |
| Interest Expense | \$ | \$ | | \$ |

Auto Payment From BECU Account (if desired, select option and account)

| | | |
|---|--|---------------------|
| AUTO PAY OPTIONS (SELECT ONE) <input type="checkbox"/> Minimum payment due – checking <input type="checkbox"/> Minimum payment due – savings <input type="checkbox"/> Last statement balance due – checking <input type="checkbox"/> Last statement balance due – savings | | BECU ACCOUNT NUMBER |
|---|--|---------------------|

4. Loan Requests of \$50,000 or Greater

For loan requests of \$50,000 or greater, please include the following items with this completed application:

- Business Plan (include 2 year Financial Forecast)
- Interim Business Financial Statements (current within 60 days if applying for \$100,000 or greater)
- Business IRS Tax Returns (for the prior 3 years)
- Business Financial Statements (for the prior 2 years, 3 years if applying for \$100,000 or greater)
- Personal Financial Statements (current within 60 days for each 25% or more Owner/Guarantor)
- Personal IRS Tax Returns (for the prior 2 years for each 25% or more Owner/Guarantor)

Some applications may require further consideration and additional information may be requested

5. Agreements and Signatures

By signing below you (Guarantor):
 You certify that the information contained herein is complete and accurate. You further authorize BECU to obtain a consumer credit report and a business credit report for use in assessing your personal creditworthiness in connection with this application by the Business and you agree that, as long as the credit account is open, we may obtain credit reports about you 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.

| | | |
|-------------------------|-----------|------|
| NAME / TITLE (1) | SIGNATURE | DATE |
| NAME / TITLE (2) | SIGNATURE | DATE |
| NAME / TITLE (3) | SIGNATURE | DATE |
| NAME / TITLE (4) | SIGNATURE | DATE |
| BECU Use Only | LOCATION | REP |
| | | DATE |

Oral Agreements or Oral Commitments to loan money, extend credit, or to forebear from enforcing repayment of a debt are not enforceable under Washington law.

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 Business Services, P.O. Box 97050 Seattle, WA 98124 or 206.812.5140 within 60 days from the date you are notified for our decision. We will send you a written statement of reasons for the denial within 30 days of your request for this statement.

PERSONAL FINANCIAL STATEMENT

1. Personal Profile

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.

Check one of the following: Married Unmarried Separated

| Individual Information | | | | Joint Information | | | |
|------------------------|---------------|------------------------|-----|-------------------|---------------|------------------------|-----|
| NAME | | SOCIAL SECURITY NUMBER | | NAME | | SOCIAL SECURITY NUMBER | |
| ADDRESS | | | | ADDRESS | | | |
| CITY | | STATE | ZIP | CITY | | STATE | ZIP |
| PHONE | EMAIL ADDRESS | | | PHONE | EMAIL ADDRESS | | |
| EMPLOYER NAME | | EMPLOYMENT START DATE | | EMPLOYER NAME | | EMPLOYMENT START DATE | |
| JOB TITLE | | DATE OF BIRTH | | JOB TITLE | | DATE OF BIRTH | |

| Assets | Note: Complete Schedules first | Liabilities |
|--|--------------------------------|--|
| Cash in BECU <small>Details Schedule A</small> | \$ | Credit Cards Payable <small>Details Schedule H</small> |
| Cash on Hand, in Banks, & Credit Unions <small>Details Schedule A</small> | \$ | Notes, Loans, and Accounts Payable <small>Details Schedule H</small> |
| Marketable Securities / Stocks and Bonds <small>Details Schedule B</small> | \$ | Notes Due to Relatives and Friends <small>Details Schedule H</small> |
| IRA and Tax Deferred Accounts <small>Details Schedule A</small> | \$ | Taxes Due <small>Details Schedule H</small> |
| Cash Value of Life Insurance <small>Details Schedule C</small> | \$ | Loans on Life Insurance Policies <small>Details Schedule C</small> |
| Real Estate Owned <small>Details Schedule D</small> | \$ | Real Estate Mortgages Payable <small>Details Schedule E</small> |
| Notes and Accounts Receivable <small>Details Schedule F</small> | \$ | Contract Accounts Payable <small>Details Schedule H</small> |
| Personal Property <small>Details Schedule G</small> | \$ | Other Liabilities Due <small>Details Schedule H</small> |
| Other Assets <small>Details Schedule F</small> | \$ | TOTAL LIABILITIES |
| Ownership Interest in Business <small>Details Schedule F</small> | \$ | Net Worth (Total Assets Minus Total Liabilities) |
| TOTAL ASSETS | \$ | TOTAL LIABILITIES AND NET WORTH |

| Annual Income | Estimate of Annual Expenses |
|---|-----------------------------|
| Salary, Bonus, and Commissions | \$ |
| Net Investment Income | \$ |
| Rental and Lease Income (Net) | \$ |
| 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. | \$ |
| Other Income – (Itemize) | \$ |
| Provide the following only if Joint account: | \$ |
| Joint Applicant Salary, Bonus, and Commissions | \$ |
| 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. | \$ |
| Joint Application Other Income – (Itemize) | \$ |
| TOTAL | \$ |

| General Information | Contingent Liabilities |
|--|---|
| Are any assets pledged other than described in the SCHEDULES below? <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you an endorser, co-signer, or guarantor on additional loans or liabilities? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you a defendant in any suits or legal actions? <input type="checkbox"/> Yes <input type="checkbox"/> No | Do you have any liability to repay any other leases or contracts? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Date of most recent Income Tax return filed Year: _____ | Do you have any contingent liabilities arising from legal claims? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you ever been declared bankrupt in the last 10 years? <input type="checkbox"/> Yes <input type="checkbox"/> No | Do you have any Federal or State past due income taxes? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you partner or officer in any other venture <input type="checkbox"/> Yes <input type="checkbox"/> No | Other <input type="checkbox"/> Yes <input type="checkbox"/> No |

| Schedule A. Cash, Savings Accounts, CDs, and IRA Accounts | | | |
|---|-----------------|-----------------|-------------------|
| Name of Bank, Credit Union, or Brokerage | Account Balance | Type of Account | Type of Ownership |
| | \$ | | |
| | \$ | | |
| | \$ | | |
| <input type="checkbox"/> Attach Bank or Credit Union Statements TOTALS | \$ | | |

B. Securities Owned (Including U.S. Government Bonds and all other Stocks and Bonds)

| Face Value Bonds Or # of Shares/Stocks | Description (indicate those not registered in your name) | Type of Ownership | Cost | Market Value U.S. Gov. Sec. | Market Value Marketable Sec. | Market Value Not Readily Marketable | Amount Pledged To Secured Loan |
|--|--|-------------------|---------------|-----------------------------|------------------------------|-------------------------------------|--------------------------------|
| | | | \$ | \$ | \$ | \$ | \$ |
| | | | \$ | \$ | \$ | \$ | \$ |
| | | | \$ | \$ | \$ | \$ | \$ |
| <input type="checkbox"/> Attach Brokerage Statements | | | TOTALS | \$ | \$ | \$ | |

C. Life Insurance (List only those Policies that you own)

| Company | Face Amount | Cash Surrender Value | Loans | Policy Pledged as Collateral | Beneficiary |
|---|-------------|----------------------|-------|------------------------------|-------------|
| | \$ | \$ | \$ | | |
| | \$ | \$ | \$ | | |
| <input type="checkbox"/> See Attached Itemization | | TOTALS | \$ | \$ | |

D. Real Estate Owned (Indicate % of your Ownership Interest)

| Title in Name Of | % Owned | Date Acquired | Original Cost | Present Value of Real Estate |
|---|---------|---------------|---------------|------------------------------|
| | | | \$ | \$ |
| | | | \$ | \$ |
| <input type="checkbox"/> See Attached Itemization | | | TOTAL | \$ |

E. Mortgage or Contracts Payable

| Name of Lender | Payment | Rent Income | Net Cash Flow | Balance Due |
|---|---------|---------------|---------------|-------------|
| | \$ | \$ | \$ | \$ |
| | \$ | \$ | \$ | \$ |
| | \$ | \$ | \$ | \$ |
| <input type="checkbox"/> See Attached Itemization | | TOTALS | \$ | \$ |

F. Other Assets

| Asset Description | Value |
|---|-------|
| | \$ |
| | \$ |
| | \$ |
| <input type="checkbox"/> See Attached Itemization | |
| TOTAL | \$ |

G. Personal Property (Indicate % of your Ownership Interest)

| Description | % | Date When New | Cost When New | Value Today | Loans on Property | |
|---|---|---------------|---------------|--------------|-------------------|-----------------|
| | | | | | Balance Due | To Whom Payable |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| <input type="checkbox"/> See Attached Itemization | | | | TOTAL | \$ | |

H. Loans, Installment Loans, Credit Lines, and Notes Payable

| Payable to | Joint on account | Due Date | Balance | Monthly Payment | Collateral (if any) |
|---|------------------|----------|---------------|-----------------|---------------------|
| | | | \$ | \$ | |
| | | | \$ | \$ | |
| | | | \$ | \$ | |
| | | | \$ | \$ | |
| <input type="checkbox"/> See Attached Itemization | | | TOTALS | \$ | \$ |

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 | DATE |
| SIGNATURE | DATE |

| | | |
|--|--------------------|--------------------|
| 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 |

CERTIFICATION REGARDING BENEFICIAL OWNERS OF LEGAL ENTITY MEMBERS



Please complete this form and sign it in ink. Questions? Please contact us at **800.233.2328**.

| 1. Legal Entity Information | | |
|-----------------------------|---|------------------------|
| LEGAL ENTITY NAME | LEGAL ENTITY TYPE <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership | LEGAL ENTITY EIN / SSN |
| LEGAL ENTITY ADDRESS | | CITY |
| STATE / PROVINCE | ZIP / POSTAL CODE | COUNTRY |

2. General Instructions

What is this form?

To help the government fight financial crime, **Federal regulation requires certain financial institutions to obtain, verify, and record information** about the **Beneficial Owners of Legal Entity** members. **Legal Entities** can be abused 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** (i.e., the **Beneficial Owners**) helps law enforcement investigate and prosecute these crimes.

Who is a Beneficial Owner?

Beneficial owners are each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the **Legal Entity** member (e.g., each natural person that owns 25 percent or more of the shares of a corporation).

Who is a Beneficial Owner with significant responsibility?

An individual with significant responsibility for managing the **Legal Entity** member (e.g., a chief executive officer, chief financial officer, chief operating officer, managing member, general partner, president, vice president, or treasurer).

Who is required to complete and sign this form?

This form must be completed by the person opening a new account, establishing a loan, or maintaining an account by adding or removing an authorized signer or changing the business's name on behalf of a **Legal Entity** with any of the following U.S. financial institutions: (i) a bank or credit union; (ii) a broker or dealer in securities; (iii) a mutual fund; (iv) a futures commission merchant; or (v) an introducing broker in commodities. If the account or loan has an automatic renewal feature, you 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.

For the purposes of this form, a **Legal Entity** includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a secretary of state or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. **Legal Entity** does not include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

What information am I required to provide?

This form requires you to provide the name, address, date of birth and Social Security number (or passport number or other similar information, in the case of non-U.S. Persons) for the **Beneficial Owner(s)** and **Beneficial Owner** with significant responsibility.

The number of individuals that satisfy this definition of **Beneficial Owner** may vary. Under section (i), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (i), you must provide the identifying information of one individual under section (ii). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. also holds a 30 percent equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii) and four 25 percent equity holders under section (i)).

What are the identification requirements?

- For U.S. persons, provide Social Security number (SSN) only.
- For non-U.S. persons, provide SSN, a passport number, and country of issuance. In lieu of a passport, non-U.S. persons may also provide an alien identification card number, or number, and country of issuance or any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.

BECU may also ask to see a copy of a driver's license or other identifying document for each **Beneficial Owner** listed on this form.

Section 3 is required.

| 3. Beneficial Owner with 25% or More Ownership | | |
|--|-------------------|---------------------|
| <p>Provide the following information for each individual, if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship, or otherwise, owns 25 percent or more of the equity interests of the Legal Entity listed above. If no individual meets this definition, please check the Beneficial Owner with 25% or more ownership not applicable check box below this section, and proceed to section 4. <i>Beneficial Owner with Significant Responsibility.</i></p> | | |
| BENEFICIAL OWNER NAME (1) | | TITLE |
| PERCENT OWNERSHIP | DATE OF BIRTH | SSN |
| ADDRESS (residential or business street) | | CITY |
| STATE / PROVINCE | ZIP / POSTAL CODE | COUNTRY |
| If you do not have a Social Security number: Refer to identification requirements in section 2 on this form and provide the required ID information below. | | |
| ID NUMBER | ID TYPE | COUNTRY OF ISSUANCE |
| BENEFICIAL OWNER NAME (2) | | TITLE |
| PERCENT OWNERSHIP | DATE OF BIRTH | SSN |
| ADDRESS (residential or business street) | | CITY |
| STATE / PROVINCE | ZIP / POSTAL CODE | COUNTRY |
| If you do not have a Social Security number: Refer to identification requirements in section 2 on this form and provide the required ID information below. | | |
| ID NUMBER | ID TYPE | COUNTRY OF ISSUANCE |
| BENEFICIAL OWNER NAME (3) | | TITLE |
| PERCENT OWNERSHIP | DATE OF BIRTH | SSN |
| ADDRESS (residential or business street) | | CITY |
| STATE / PROVINCE | ZIP / POSTAL CODE | COUNTRY |
| If you do not have a Social Security number: Refer to identification requirements in section 2 on this form and provide the required ID information below. | | |
| ID NUMBER | ID TYPE | COUNTRY OF ISSUANCE |
| BENEFICIAL OWNER NAME (4) | | TITLE |
| PERCENT OWNERSHIP | DATE OF BIRTH | SSN |
| ADDRESS (residential or business street) | | CITY |
| STATE / PROVINCE | ZIP / POSTAL CODE | COUNTRY |
| If you do not have a Social Security number: Refer to identification requirements in section 2 on this form and provide the required ID information below. | | |
| ID NUMBER | ID TYPE | COUNTRY OF ISSUANCE |
| <input type="checkbox"/> Beneficial Owner with 25% or more ownership not applicable. | | |

Sections 4, 5, and 6 are required.

4. Beneficial Owner with Significant Responsibility

Please provide information for one individual with significant responsibility for managing the **Legal Entity** listed above, whether or not they are the legal owner, such as:

- An executive officer or senior manager (e.g., chief executive officer, chief financial officer, chief operating officer, managing member, general partner, president, vice president, treasurer); or
- Any other individual who regularly performs similar functions.
- If applicable, an individual listed under section 3. *Beneficial Owner with 25% or more Ownership* may also be listed in this section, 4. *Beneficial Owner with Significant Responsibility*.

| | | |
|---|-------------------|---------------------|
| NAME | | DATE OF BIRTH |
| TITLE | | SSN |
| ADDRESS (residential or business street) | | CITY |
| STATE / PROVINCE | ZIP / POSTAL CODE | COUNTRY |
| If you do not have a Social Security number: Refer to identification requirements in section 2 on this form and provide the required ID information below. | | |
| ID NUMBER | ID TYPE | COUNTRY OF ISSUANCE |

5. Information about the Individual Completing This Form

Persons opening a new account, establishing a loan, or maintaining an account by adding or removing an authorized signer or changing the business's name on behalf of a **Legal Entity** must complete this section.

| | | |
|---|---------|---------------------|
| NAME | TITLE | SSN |
| If you do not have a Social Security number: Refer to identification requirements in section 2 on this form and provide the required ID information below. | | |
| ID NUMBER | ID TYPE | COUNTRY OF ISSUANCE |

6. Certification and Agreement by the Individual Who Completed Section 5 (above)

By signing below, I hereby certify, to the best of my knowledge, that the information provided on this form is complete and correct.

| | | |
|------|-----------|------|
| NAME | SIGNATURE | DATE |
|------|-----------|------|

| | | |
|----------------------|--------------------------------------|-------------------|
| BECU Use Only | <input type="checkbox"/> ID Verified | Org Number: _____ |
|----------------------|--------------------------------------|-------------------|