



New Account Information - Business Accounts

Name of Business	_____	Ownership:	_____	Sole Proprietorship
Address	_____		_____	Partnership
	_____		_____	Limited Liability Comp
Phone Number	_____		_____	Corporation
Tax ID	_____		_____	Unincorporated Assoc
Business Activity	_____			

You have been designated as an authorized signer on an account at Frontier Bank. Without personal identifying information on file we are unable to respond to any questions/requests you may have on your account. For questions with this request, please contact us at 1-800-341-2265. Thank you.

Authorized Signer Information:

Name	_____	Social Security #	_____
Address	_____	Driver's License #	_____
City, State, ZIP	_____	Mother's Maiden Name	_____
Work Phone #	_____	Date of Birth	_____
Home Phone #	_____	City of Birth	_____
Cell Phone #	_____	Email Address	_____
Identity Question #1	_____	Answer #1	_____
Identity Question #2	_____	Answer #2	_____
Identity Question #3	_____	Answer #3	_____

Authorized Signer Information:

Name	_____	Social Security #	_____
Address	_____	Driver's License #	_____
City, State, ZIP	_____	Mother's Maiden Name	_____
Work Phone #	_____	Date of Birth	_____
Home Phone #	_____	City of Birth	_____
Cell Phone #	_____	Email Address	_____
Identity Question #1	_____	Answer #1	_____
Identity Question #2	_____	Answer #2	_____
Identity Question #3	_____	Answer #3	_____

Authorized Signer Information:

Name	_____	Social Security #	_____
Address	_____	Driver's License #	_____
City, State, ZIP	_____	Mother's Maiden Name	_____
Work Phone #	_____	Date of Birth	_____
Home Phone #	_____	City of Birth	_____
Cell Phone #	_____	Email Address	_____
Identity Question #1	_____	Answer #1	_____
Identity Question #2	_____	Answer #2	_____
Identity Question #3	_____	Answer #3	_____

When opening a new account, please submit this completed form to your **local Frontier Bank**, along with the following items:

- Filing or organizing documents
- Operating agreement
- EIN application, or other EIN verifying document
- Colored photocopy/picture of the drivers license of each:
 - Signer on the account
 - Beneficial Owner- own 25% or more of the business
 - Controller or Manager of legal entity

Suggested Identity Questions:

- Oldest sibling's middle name
- Youngest sibling's middle name
- Town your mom and dad met
- Childhood phone number- last 4 digits
- Favorite color
- Oldest cousin's first name
- First name of your first kiss
- Place of your wedding reception
- Place of your first kiss
- First company you worked for
- Last name of your 3rd grade teacher
- Childhood hero
- Favorite place to visit
- Childhood friend

Once the form is filled out and documents are collected, please contact your **local Frontier Bank** to open an account.