

Partnership

Business Account Opening

Select your branch preference: Cranbrook Elkford Fernie Sparwood
 Castlegar Slocan Valley West Boundary

We understand that your time is valuable and in order to process your account opening request as quickly and efficiently as possible we ask that you review the instructions outline and provide the information requested on this form.

- Completed form can be forwarded to StellerVista CU via e-mail at commercial.support@stellervista.com with all the required documentation.
- Completed form can be dropped off at our branches or mailed with all the required documentation
- Forms and information are available on our website at www.stellervista.com

StellerVista CU is member owned; a \$5 Personal Equity Share deposit is required for each partner/signer.

To open a **Partnership** or **Joint Venture** business account, the following information and documentation is required in order to comply with all Legislative and Credit Union policies.

Note: If the Partnership or Joint Venture includes one or more Corporations, we will require the information in items 2) and 3) below from each corporate partner. Complete additional forms for each corporate partner. We will also require; proof of incorporation and a list of the names of all directors of each corporate partner and Central Securities Registry for each corporate partner.

1) The following information will be required:

- **Statement of Business Registry through BC Registry as a Partnership. The business must be in Active status.**
- **9-digits Business Number (BN)**
- **Partnership Agreement may be required**

2) Provide us with the following information about your Business:

| | | | |
|--|--|---------------|--|
| Business Name: (Match with BC Registry) | | | |
| Business Address: (legal Address) | | | |
| Business Mailing Address: (Business location or principal Owner's house) | <input type="checkbox"/> Same as above | | |
| Business Phone Number: | | | |
| Business e-mail address: | | | |
| Primary Business Activity: | | | |
| Primary Contact Name: | | | |
| Phone#: | | Email: | |



3) Provide us with the following personal information for each of the account signers; if more than two please add an additional form. Individual signers may provide information separately if they prefer.

| | Partner/Signer #1 | Partner / Signer #2 |
|--|--|--|
| Legal Name: First | | |
| Middle Name | <input type="checkbox"/> No Middle Name | <input type="checkbox"/> No Middle Name |
| Last Name | | |
| Address (Civic address): Street City, Postal Code | | |
| Mailing Address (if different): | <input type="checkbox"/> Same as above | <input type="checkbox"/> Same as above |
| Birth Date (mm/dd/yyyy) | | |
| SIN | | |
| Contact Number: Home Work Cell | | |
| Email Address | | |
| Occupation | | |
| Access to Online Banking ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Operating accounts that are most appropriate for your needs:

Please indicate the account types required or interested in:

| Chequing | Saving | Investments |
|--|---|---|
| <input type="checkbox"/> ElectroLink Business | <input type="checkbox"/> Super Saver | <input type="checkbox"/> GIC /Term Deposits |
| <input type="checkbox"/> Business Chequing Plan | <input type="checkbox"/> Member Advantage | <input type="checkbox"/> Accumulator |
| <input type="checkbox"/> Business Lite | | |
| <input type="checkbox"/> Business Core | | |
| <input type="checkbox"/> Business Unlimited | | |
| <input type="checkbox"/> USD Chequing | | |

Access to your accounts

| Signatories | ATM | Night Deposit | Cheques |
|--|---|--|--|
| Will accounts be two to sign? <input type="checkbox"/> Yes <input type="checkbox"/> No | Access to the account(s) to deposit to the account using a debit card? <input type="checkbox"/> Yes <input type="checkbox"/> No | Expect to use night deposit facilities? <input type="checkbox"/> Yes <input type="checkbox"/> No | Will need to order cheques? <input type="checkbox"/> Yes <input type="checkbox"/> No |

CHECKLIST: HAVE YOU SUBMITTED THE FOLLOWING INFORMATION?

- Required documents:**
 - Statement of Business Registration through BC Registry. Business must be in Active status.
 - Business Number (BN)
- \$100 cheque made payable to your business name
- Completed and signed Consent form (Consent forms are available via www.stellervista.com or at branch)
- Partnership Agreement may be required if lending product is requested
- All the forms are completed in full
- Two pieces of copied Valid ID from each Partner/signer (Make copies as necessary)