

Strata Corporation

Business Account Opening

Select your branch preference:

☐ Cranbrook

☐ Elkford

☐ Fernie

☐ Sparwood

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. The form can be:

- Completed, saved with your Association, Group, Team or Club name and then forwarded to StellerVista via e-mail with the required documentation to Commercial.Support@ekccu.com
- Completed and printed and then dropped off or mailed with the required documentation.
- Forms and information are available on our website at:
<https://www.ekccu.com>

StellerVista is member owned; a \$5 share deposit is required which will stay with the account until such time that the account is closed.

To open a **Registered Strata Corporation** business account, the following information and documentation is required in order to comply with all Legislative and Credit Union policies.

1) Provide ALL the following:

- Copy of current Bylaws
- Copy of Minutes (dated and signed)

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

Legal Name of Strata:			
Business Information:			
Mailing Address			
Civic Address			
City, Postal Code			
Email Address			
Phone #			
Primary Contact Name:			
Phone#		Email:	

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

	Signer 1	Signer 2	Signer 3
Legal Name: (Must match Primary ID) First Name			
Middle Name	<input type="checkbox"/> No Middle Name	<input type="checkbox"/> No Middle Name	<input type="checkbox"/> No Middle Name
Last Name			
Home Address: Mailing Civic City Postal Code			
Birth Date: (mm/dd/yyyy)			
Contact Numbers: Home			
Work/Cell			
Email Address			
Occupation:			

Access to Online Banking?	Yes	No	Yes	No	Yes	No

Operating accounts that are most appropriate for your needs:

Please indicate the account types required:

Chequing	Saving	Investments
<input type="checkbox"/> Strictly Business (Operating Account) ElectroLink Business	<input type="checkbox"/> Business Savings <input type="checkbox"/> Member Advantage	<input type="checkbox"/> Term Deposits

Access to your accounts

Signatories	Online Banking	ATM	Night Deposit	Cheques
All accounts will be set up with two to sign.	All accounts will be set up with the two to sign restriction.	Access to the account(s) to deposit to the account using a debit card <input type="checkbox"/> Yes <input type="checkbox"/> No ATM cards will not be issued for withdrawals.	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?

- ☐ Copy of Strata Plan registration
- ☐ Copy of current Bylaws
- ☐ Copy of Minutes (dated and signed)
- ☐ \$100 cheque made payable to your organizations name
- ☐ Completed and signed Consent form for each director/signer (additional copies [here](#))
- ☐ Two pieces of copied ID for each director/signer (Make copies as necessary)
- ☐ Forms completed in full