



**WELCOME!**

Please tell us about yourself

Bank of Blue Valley



**I. Applicant Information**

First Name Middle Name Last Name

Residential Address City/State/Zip

Mailing Address (if different) City/State/Zip

Nickname SSN/ITIN Date of Birth (mm/dd/yyyy)

Home Phone Cell Phone Work Phone

Email Address Verbal Account Password

**Note:** If the above residential address does not match your ID's address, please provide one of the following documents:

- Current Utility Bill
- Rental/Lease Agreement
- Property Tax Letter
- Homeowner's Insurance Policy

**1a. What is your employment status?**  Employed  Unemployed  Student  Retired  Homemaker  Minor

If **Employed**, **Unemployed**, or **Retired**, what is/was your occupation?

What is/was the name of employer? \_\_\_\_\_

What is/was the nature of business (current or previous)? \_\_\_\_\_

**1b. Are you a U.S. Citizen?**  Yes  No

If **No**, what is your country of origin (home country or country of citizenship)? \_\_\_\_\_

If **No**, do you have (check all that applies):  Green Card  SSN/ITIN  I am a foreign resident of the U.S.  None: W8-BEN needed

**II. Joint Applicant Information**

First Name Middle Name Last Name

Residential Address City/State/Zip

Mailing Address (if different) City/State/Zip

Nickname SSN/ITIN Date of Birth (mm/dd/yyyy)

Home Phone Cell Phone Work Phone

Email Address Verbal Account Password

**Note:** If the above residential address does not match your ID's address, please provide one of the following documents:

- Current Utility Bill
- Rental/Lease Agreement
- Property Tax Letter
- Homeowner's Insurance Policy

**1a. What is your employment status?**  Employed  Unemployed  Student  Retired  Homemaker  Minor

If **Employed**, **Unemployed**, or **Retired**, what is/was your occupation? \_\_\_\_\_

What is/was the name of employer? \_\_\_\_\_

What is/was the nature of business (current or previous)? \_\_\_\_\_

**1b. Are you a U.S. Citizen?**  Yes  No

If **No**, what is your country of origin (home country or country of citizenship)? \_\_\_\_\_

If **No**, do you have (check all that applies):  Green Card  SSN/ITIN  I am a foreign resident of the U.S.  None: W8-BEN needed

### III. Beneficiary Information

**In the event of your death, if there is any money remaining in the account what would you like to have happen to it?**

\*If you want your account funds to go directly to a person(s), please provide the following for each person you name as a Payable-on-Death (POD) beneficiary. Please note Bank of Blue Valley may not release funds if your named beneficiary is a minor. Instead, a court may require that a guardianship be established to handle the money for the minor.

\_\_\_\_\_  
**1<sup>st</sup> Beneficiary Legal Name** SSN (last four is acceptable) Date of Birth (mm/dd/yyyy)

\_\_\_\_\_  
 Residential Address City/State/Zip Contact Number

\_\_\_\_\_  
**2<sup>nd</sup> Beneficiary Legal Name** SSN (last four is acceptable) Date of Birth (mm/dd/yyyy)

\_\_\_\_\_  
 Residential Address City/State/Zip Contact Number

Additional beneficiary(ies), attach list

### IV. Account Activity

What is the purpose of the account? \_\_\_\_\_

Source of Initial Deposit:  Cash  Another Financial Institution  BBV Account  Other \_\_\_\_\_

Transaction Type	Number of Transactions Per Month [TPM]	Average Dollar Amount of Transaction [ADAT]
	0, 1-3, 4-6, 7-10, >10	\$0-\$1,000; \$1,001-\$3,000; \$3,001-\$5,000; \$5,001-\$10,000; \$10,001+
Cash/ATM Deposits		
Cash/ATM Withdrawals		
Check Deposits		
Check Withdrawals		
ACH Deposits		
Incoming Domestic Wires		
Outgoing Domestic Wires		
Incoming International Wires*		
Outgoing International Wires*		

\*Please list countries and purpose of wires: \_\_\_\_\_

Please indicate below **ALL** Products and Services you wish to **ACTIVATE**:

<input type="checkbox"/> Debit Card (Personal Rewards, CardValet, Managing App) Issue card(s) to: <input type="checkbox"/> Primary Owner <input type="checkbox"/> Joint Owner <input type="checkbox"/> Online Banking (Bill Payment, Person-2-Person Payments)	<input type="checkbox"/> Mobile Banking (Mobile Banking App, Mobile Deposit) Credit Card <input type="checkbox"/> Consumer Loan: <input type="checkbox"/> Home Equity Loan <input type="checkbox"/> Auto Loan
--	---

How did you hear about us? Please check all that apply.

- |  |   |   |  |  |
|--|---|---|--|--|
| <input type="checkbox"/> Print           | <input type="checkbox"/> Community Event      | <input type="checkbox"/> Location of Business | <input type="checkbox"/> Loan Reputation | <input type="checkbox"/> Referral/Employer |
| <input type="checkbox"/> Radio           | <input type="checkbox"/> Community Reputation | <input type="checkbox"/> Location of Employer | <input type="checkbox"/> Rates/Deposits  | <input type="checkbox"/> Referral/Family   |
| <input type="checkbox"/> Television      | <input type="checkbox"/> Connections Program  | <input type="checkbox"/> Location of Home     | <input type="checkbox"/> Rates/Loan      | <input type="checkbox"/> Referral/Friend   |
| <input type="checkbox"/> Internet Search | <input type="checkbox"/> Existing Customer    |   |  | <input type="checkbox"/> Social Media      |

By signing this document, you certify all information contained herein is true and correct.

\_\_\_\_\_  
 Applicant Name (Print)

\_\_\_\_\_  
 Joint Applicant Name (Print)

\_\_\_\_\_  
 Applicant Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Joint Applicant Signature

\_\_\_\_\_  
 Date

For Internal Use Only

Account Number(s):

By Banking Specialist:

Date: