



Business Membership Application and Agreement

Application Date _____

It pays to belong.

BUSINESS NAME	Business (DBA) Name		Expiration Date(if DBA Name)	
	Current Street Address	City,	State	Zip
	Current Mailing Address (if different)	City,	State	Zip
	Phone Number(s)	email address for eStatements		
	Taxpayer Identification Number	Name associated with this number at IRS, if different than Business Name		
	Assumed Name (If Applicable)	Expiration Date of Assumed Name		
	Assumed Name (If Applicable)	Expiration Date of Assumed Name		

Business Classification:

- ☐ Sole Proprietor
 ☐ Partnership
 ☐ Limited Partnership
 ☐ Unincorporated Association
☐ Non-Profit Corporation
 ☐ Corporation
 ☐ Limited Liability Company

Field of Membership: Antrim, Benzie, Charlevoix, Cheboygan, Crawford, Emmet, Grand Traverse, Kalkaska, Leelanau and Otsego Counties

☐ Located or regularly conduct business in the above Field of Membership or ☐ Other _____

AUTHORIZED SIGNERS	Unless the credit union receives written instructions to the contrary, The following individuals are authorized to deposit and withdraw funds from each account established under this application and transact any other business related to such accounts now or in the future. Bay Winds Federal Credit Union is authorized to pay out funds and/or transact any other business related to such accounts with any one of the signatures below.			
	Name		Title	
	Birth Date	Driver's License/Other Identification Number	Issuing State	Exp Date
	<input type="checkbox"/> Debit Card Requested			
	Signature			
	X			
	Name		Title	
	Birth Date	Driver's License/Other Identification Number	Issuing State	Exp Date
	<input type="checkbox"/> Debit Card Requested			
	Signature			
	X			
	Name		Title	
	Birth Date	Driver's License/Other Identification Number	Issuing State	Exp Date
	<input type="checkbox"/> Debit Card Requested			
	Signature			
	X			

USA PATRIOT Act Notice

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT. To help the government fight the financing of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account for the above named business, we will ask for the name of the business and other information that will allow us to identify its existence. We may also ask for personal information about you, other owners of the business, or any person designated as a signatory upon the account by resolution. The information we request for individuals may include name, address, date of birth, social security number, and other information that will allow us to identify those persons. We may also ask to see a driver's license or other identifying documents.

TIN Certification and Backup Withholding Information

INSTRUCTIONS TO SIGNER: If you have been notified by the Internal Revenue Service (IRS) that the business is subject to backup withholding due to payee underreporting and you have not received a notice from the IRS that the backup withholding has terminated, you must strike out the language in clause 2 of the certification below. Under the penalties of perjury, the undersigned certifies that (1) the Taxpayer Identification Number (T.I.N.) shown on this form is the correct T.I.N. of the business or other entity applying for membership and services (or the entity is waiting for a T.I.N. to be issued to it); and (2) the entity is not subject to backup withholding because: (a) it is exempt from backup withholding, or (b) it has not been notified by the Internal Revenue Service (IRS) that it is subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified the business that it is no longer subject to backup withholding; and (3) the entity is a U.S. person*.

* IRS Definition of a U.S. Person. For federal tax purposes, you are considered a U.S. person if you are: (1) An individual who is a U.S. citizen or U.S. resident alien, (2) A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, (3) An estate (other than a foreign estate), or (4) A domestic trust (as defined in Regulations Section 301.7701-7).

Certification and Agreement Signature

By signing below, I/we hereby apply for membership of the above-named business or other entity ("Business") in Bay Winds Federal Credit Union. The above-named Business agrees to the terms and conditions of the Membership / Account Agreement for Businesses and Other Entities, receipt of which is acknowledged, said Agreement and amendments being incorporated by reference herein. The above-named Business further agrees that the Credit Union may change any term or provision of said Agreement upon thirty (30) days notice or such shorter notice period as may be required in order to comply with a change in applicable laws or regulations. The above-named Business further agrees to abide by the Bylaws, Policies and Procedures of the Credit Union. The individual signing below warrants and represents that the above-named Business is validly existing and in good standing in the State of Michigan and that he/she has the legal authority and corporate authority to bind the above-named Business to this Agreement. The above-named Business and any individual signing this Membership Card in any capacity authorize the Credit Union to verify or obtain further information as it may deem necessary concerning the Business or the individuals, including through the use of reports obtained from consumer reporting agencies and in accordance with the Credit Union's Member Identification Program pursuant to the USA PATRIOT Act. The undersigned acknowledges that the provision of all financial services to the Business by the Credit Union is subject to qualification and approval. Specimens of the signatures of those persons authorized to make withdrawals or otherwise transact business on the accounts of the Business are set forth below in the "Authorized Signers" section of this form, and the credit union may act upon the request of such Business bearing any such signatures, including, but without limiting the generality of the foregoing, the pledging of this account in whole or in part to secure any extension of credit to the Business, until the credit union receives notice to the contrary. The Business may change its Authorized Signers by providing appropriate written documentation to the credit union.

I / We certify that this organization will not engage in an internet gambling business with this account as described in the Unlawful Internet Gambling Enforcement Act (UIGEA) of 2006.

The internal Revenue Service does not require your consent to any provision of this Member Service Card other than the certification required to avoid backup withholding.

By signing below, I certify that I am authorized to open an account for the business named in this application. A resolution for the business classification has been completed with this signature card.

X

Signature

Date

Corporation; LLC; Association: Name & Title of person authorized to open account

CREDIT UNION USE ONLY

Application Received by _____ ☐ Scanned Date _____

☐ ChexSystems _____ ☐ Checking ☐ Debit Card(s) Ordered ☐ Checks ordered
☐ ID verification ☐ Enrolled in Telephone banking ☐ Enrolled in Online Banking ☐ Enrolled in eStatements

Reviewed by Membership Officer _____ ☐ Scanned Date _____

Business Name

Account #



Business Account Transaction Authorization & Resolutions

Application Date _____

Business Name

Business Classification:

- ☐ Non-Profit Corporation ☐ Partnership ☐ Limited Partnership ☐ Unincorporated Association
☐ Corporation ☐ Limited Liability Company

The following individuals are designated as Authorized Signers as specified in the Resolutions section below to transact business with Bay Winds Federal Credit Union on behalf of the above-named business: (Note: Signature Specimens and additional identifying information are set forth in the Business Membership Application and agreement.)

Name	Title
Name	Title
Name	Title
Name	Title

Resolutions

The above-named business or other legal entity ("business") has applied for membership in BAY WINDS FEDERAL CREDIT UNION. The undersigned certifies that the following is a true representation of resolutions duly adopted by the Board of Directors/Members/Partners/Governing Body at a duly constituted meeting, as further described below:

RESOLVED, that this business is hereby authorized to apply for membership and to deposit funds into accounts in Bay Winds Federal Credit Union, and agrees to be bound by the terms and conditions of any such account opened with the Credit Union.

FURTHER RESOLVED, that until further written notice, said Credit Union shall be authorized to pay withdrawals as requested, by draft or otherwise, by any of the persons whose names and titles appear on the Transaction Authorization attached to these Resolutions as Authorized Signers.

FURTHER RESOLVED, that said Credit Union is authorized to accept a pledge of all or any part of said account as security for any obligation owed to it by this business, which shall be executed by any of the same Authorized Signers.

FURTHER RESOLVED, that every authorization previously granted to the Credit Union with respect to the accounts owned by the account is revoked and rescinded. However, the authority given hereby is retroactive, and any acts referred to which were performed by an Authorized Signer(s) prior to the adoption of these resolutions are ratified and confirmed. Further that every authorization granted to the Credit Union with respect to this account shall remain in full force and effect until the Credit Union is provided with a new appropriately authorized Business Account transaction Authorization / Resolutions.

FURTHER RESOLVED, that the person(s) whose name(s) appear on the transaction authorization were incumbents of the office/positions of the business set next to their names on the date indicated.

FURTHER RESOLVED, that the above resolutions do not conflict with or contravene the creation or governing documents of the business.

Certification for Business Classification

☐ Certification of Corporation

Business Name

I hereby certify that I am the duly elected and qualified Secretary of the above-named corporation, that the foregoing is a complete, true and correct representation of resolutions duly adopted by the Board of Directors of the corporation at a duly constituted meeting held on _____, at which a quorum was present and where a majority of those voting voted in favor of said resolutions, and that the resolutions are recorded in the minutes of the corporation and are now in full force and effect.

Secretary Signature

Date

X

If the Secretary is designated to sign or act alone on this account, this Certification of Corporation must be further signed below by an additional director or officer of the corporation, unless there are no other individuals who are directors or officers, in which case the statement below must be completed.

Director/Officer Signature

Title

Date

X

(Complete if applicable) As permitted by the law of the State of Michigan, I hereby swear and affirm that there are no other individuals who are either directors or officers of the above-named entity.

Signature

Date

X

☐ Certification of Limited Liability Company or Professional Limited Liability Company

Business Name

I/We hereby certify that I/we are all of the duly appointed Member(s)/Manager(s) of the above-named Limited Liability Company (LLC)/Professional Limited Liability Company (PLLC), that the foregoing is a complete, true and correct representation of resolutions duly adopted by Member(s)/Manager(s) of the LLC/PLLC at a duly constituted meeting held on _____, at which the appropriate voting representation voted in favor of said resolutions, and that the resolutions are recorded in the minutes of the LLC/PLLC and are now in full force and effect.

(Check if applicable) ____ I/We further certify that this LLC/PLLC has not adopted an Operating Agreement, and, to the extent any future Operating Agreement adopted conflicts with any agreements between Bay Winds Federal Credit Union and the LLC/PLLC, the agreements between Bay Winds Federal Credit Union and the LLC/PLLC will control.

Member/Manager Signature

Date

X

Member/Manager Signature

Date

X

Member/Manager Signature

Date

X

☐ **Certification of Partnership**

Business Name

We hereby certify that we are all of the partners of the above-named Partnership, that the foregoing is a complete, true and correct representation of resolutions duly adopted by the partners of the Partnership at a duly constituted meeting held on _____, at which the appropriate number of partners voted in favor of said resolutions, and that the resolutions are recorded in the minutes of the Partnership, if any, and are now in full force and effect

Partner Signature

Date

X

Partner Signature

Date

X

Partner Signature

Date

X

Partner Signature

Date

X

☐ **Certification of Limited Partnership**

Business Name

We hereby certify that we are all of the partners of the above-named Limited Partnership, that the foregoing is a complete, true and correct representation of resolutions duly adopted by the partners of the Limited Partnership at a duly constituted meeting held on _____, at which the appropriate number of partners voted in favor of said resolutions, that the resolutions are recorded in the minutes of the Partnership, if any, and are now in full force and effect, and that _____ and _____ is/are the only General Partner(s) of the Limited Partnership.

General Partner Signature

Date

X

General Partner Signature

Date

X

Partner Signature

Date

X

Partner Signature

Date

X

☐ **Certification of Unincorporated Organization or Association or Other Business Entity**

Business Name

I/We hereby certify that the foregoing is a complete, true and correct representation of resolutions duly adopted by the governing body of the above-referenced organization at a duly constituted meeting held on _____, at which the appropriate number of voting representation voted in favor of said resolutions, and that the resolutions are recorded in the minutes of the organization, if any, and are now in full force and effect.

Authorized Signature

Title

Date

X



Business Account Guaranty Agreement

Application Date _____

Business Name

Business Classification:

☐ Limited Partnership

☐ Corporation

☐ Limited Liability Company

The undersigned agree that they shall be jointly and severally personally liable for and hereby jointly and severally personally guaranty all obligations that the business or other entity named above may incur under any agreement between the business or other entity and Bay Winds Federal Credit Union. The undersigned also each individually authorize the Credit Union to obtain a consumer or business credit report on such undersigned person

Name Birth Date

Address City, State Zip

Home Phone Number Cell Phone Business Phone

Social Security Number Driver's License/Other Identification Number Issuing State Exp Date

Signature Date

X

Name Birth Date

Address City, State Zip

Home Phone Number Cell Phone Business Phone

Social Security Number Driver's License/Other Identification Number Issuing State Exp Date

Signature Date

X

Name Birth Date

Address City, State Zip

Home Phone Number Cell Phone Business Phone

Social Security Number Driver's License/Other Identification Number Issuing State Exp Date

Signature Date

X

Guaranty of Business or Other Entity Obligations

Guaranty of Business or Other Entity Obligations