Business/Organization Account Checklist

Business/Organization Name: _

Account Number: ____

NOTE: Check Membership Eligibility-May Require Business Affiliate

Symitar Account Maintenance Performed (X or N/A)

Certification of Beneficial Ownership Form Completed	
Correct Savings/Checking Selected	
Business Form Packet Completed And Submitted	
Original Forms And Supporting Documents Sent To Optical	
Welcome Letter Business Accounts	
(Available From Teller Transaction Screen In Symitar)	

Sole Proprietorship (EIN or SSN)

Verification Of Employer Identification Number (EIN)/ Confirmation Letter	Verification Of Social Security Number (SSN)	
Registered Assumed Name Certificate-NC/ Fictitious Name-VA	Registered Assumed Name Certificate-NC/ Fictitious Name-VA	
Business License-SC	Business License-SC	

Corp., S-Corp., Professional Corp.

Verification Of EIN/Confirmation Letter	
Verification Of Active Status With Secretary Of State	
Registered Articles Of Incorporation/Certificate Of Incorporation/Certificate Of Authority*	
Bylaws	
Letter From Secretary Stating Who Holds The Position Responsible For Depository Accounts	
Registered Assumed Name Certificate-If Applicable	
Tax Classification C=Corporation, S=S Corporation	
Franchise Agreement***/Business License-SC	

Limited Liability Company, Professional LLC

Verification Of EIN/Confirmation Letter (in rare occasions SNN could be used)	
Verification Of Active Status With Secretary Of State	
Registered Articles Of Organization/Certificate Of Organization/Certificate Of Authority*	
Operating Agreement	
Letter From Managing Member Stating Who Holds The Position Responsible For Depository Accounts	
Registered Assumed Name Certificate-If Applicable	
Tax Classification C=Corp., S=S Corp., P=Partnership	
Franchise Agreement***/Business License-SC	

General Partnership

Verification Of EIN/Confirmation Letter	
Registered Assumed Name Certificate-NC/	
Fictitious Name-VA	
Partnership Agreement	
Letter From Person Of Authority Stating Who Holds The	
Position Responsible For Depository Accounts	
Franchise Agreement***/Business License-SC	

Limited Liability Partnership, Limited Partnership

Verification Of EIN/Confirmation Letter	
Verification Of Active Status With Secretary Of State	
Certificate Of Limited Partnership/Certificate Of Authority*	
Partnership Agreement	

Letter From Managing Member Stating Who Holds The Position Responsible For Depository Accounts	
Registered Assumed Name Certificate (If applicable)- NC/Fictitious Name-VA	
Franchise Agreement***/Business License-SC	

Organization–Political Campaign

Verification Of EIN/Confirmation Letter	
Registered Assumed Name Certificate-NC/	
Fictitious Name-VA	
Notice Of Candidacy	

Organization–Scout Groups (i.e. Cub Scout)

Verification Of EIN/Confirmation Letter	
Letter From The Secretary Or Scout Master Authorizing The	
Account And Persons With Signature Authority	
Bylaws	

Organization–Parent Teacher Organization

Letter From The Principal Authorizing Account And Persons	
With Signature Authority (EIN To Be Included In Letter)	
Bylaws	

Organization–Military Unit**

Letter From Commanding Officer Authorizing Account And Persons With Signature Authority (EIN To Be Included In Letter)

Organization-Recreation/Club**

Verification Of EIN/Confirmation Letter	
Registered Assumed Name Certificate-NC/	
Fictitious Name-VA	
Recent Meeting Minutes Authorizing The Account And	
Person(s) With Signature Authority	
Business License-SC (If Applicable****)	
Bylaws	

Organization–Association, Religious, Charitable, Educational, Tax Exempt**

Verification Of EIN/Confirmation Letter	
Registered Assumed Name Certificate-NC/	
Fictitious Name-VA	
Letter From The Secretary Authorizing The Account And	
Persons With Signature Authority	
Business License-SC (If Applicable****)	
Bylaws	

Organization–Memorial Fund

Verification Of EIN/Confirmation Letter	
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*Required if registered in a state other than where business is conducted

**Required if the organization is incorporated, follow corporation section

*** Required if part of a franchise

****Required if for profit

Branch Manager Approval: _____

Teller ID/Initials: