

NEW CUSTOMER: ORGANIZATION

This packet contains the primary documents necessary for a business or other organization to establish a new account when a relationship with Community Bank does not already exist.



This PDF file is 5 pages long and includes the following:

- ✓ Privacy Policy
- ✓ New Account Information Form: Organization
- ✓ New Account Information Form: Person

Please Note: A separate “New Account Information Form: Person” must be filled out for each company officer / account signer that does not have an existing account relationship with Community Bank.



Main Office
22 West Yokuts Avenue
Stockton, CA 95207-5715
(209) 956-7000

Waterloo Office
4426 East Waterloo Road
Stockton, CA 95215-2306
(209) 373-4300

www.cbsjbank.com



FACTS	WHAT DOES COMMUNITY BANK OF SAN JOAQUIN DO WITH YOUR PERSONAL INFORMATION?
Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
What?	The types of personal information we collect and share depend on the product or service you have with us. This information can include: <ul style="list-style-type: none"> • Social Security number • Income • Assets • Account balances • Transaction or loss history • Credit history When you are <i>no longer</i> our customer, we continue to share your information as described in this notice.
How?	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customer's personal information; the reasons Community Bank of San Joaquin chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Community Bank of San Joaquin share?	Can you limit this sharing?
For our everyday business purposes – such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes – to offer our products and services to you	Yes	No
For joint marketing purposes with other financial companies	No	We don't share
For our affiliates' everyday business purposes – information about your transactions and experiences	No	We don't share
For our affiliates' everyday business purposes – information about your creditworthiness	No	We don't share
For our affiliates to market to you	No	We don't share
For our non-affiliates to market to you	No	We don't share

Questions?

Call (209) 956-7000 or go to
<http://www.cbsjbank.com/privacy.shtml>

Who we are	
Who is providing this notice?	Community Bank of San Joaquin
What we do	
How does Community Bank of San Joaquin protect my personal information?	<p>To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.</p> <p>In addition, our employees are restricted from accessing your personal information unless there is a business reason to do so.</p>
How does Community Bank of San Joaquin collect my personal information?	<p>We collect your personal information, for example, when you</p> <ul style="list-style-type: none"> • open an account, or • apply for a loan, or • give us your contact information, or • show your government-issued ID, or • make deposits or withdrawals from your account <p>We also collect your personal information from others, such as credit bureaus, affiliates, or other companies.</p>
Why can't I limit all sharing?	<p>Federal law gives you the right to limit only</p> <ul style="list-style-type: none"> • sharing for affiliates' everyday business purposes - information about your creditworthiness • affiliates from using your information to market to you • sharing for non-affiliates to market to you <p>State laws and individual companies may give you additional rights to limit sharing.</p>
Definitions	
Affiliates	<p>Companies related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> • Our affiliate is Bank On It, Inc.
Non-affiliates	<p>Companies not related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> • Community Bank of San Joaquin does not share with non-affiliates so that they can market to you
Joint Marketing	<p>A formal agreement between nonaffiliated financial companies that together market financial products or services to you.</p> <ul style="list-style-type: none"> • Community Bank of San Joaquin doesn't jointly market



New Account Information Form: Organization

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding 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, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

ORGANIZATION INFORMATION

Name:	TIN/SSN:	
Street Address:		
City:	State:	Zip:
Mailing Address, if different: <small>(Street or P.O. Box)</small>		
City:	State:	Zip:
Business Phone:	Business Fax:	
Email:		

ACCOUNT SIGNERS

Signer's Name:	Title:
Signer's Name:	Title:
Signer's Name:	Title:
Signer's Name:	Title:

**A completed
New Account
Information
Form: Person
(CBOSJ BR004p)
must be provided
for each account
signer.**

FOR BANK USE ONLY – ID VERIFICATION

	<i>Copied</i>	<i>Viewed</i>	<i>Expire Date</i>		<i>Copied</i>	<i>Viewed</i>	<i>Expire Date</i>
Sole Proprietorship				Corporation (Profit)			
Fictitious Name Statement	<input type="checkbox"/>	<input type="checkbox"/>	_____	Articles of Incorporation	<input type="checkbox"/>	<input type="checkbox"/>	_____
Business License	<input type="checkbox"/>	<input type="checkbox"/>	_____	Corporate Bylaws	<input type="checkbox"/>	<input type="checkbox"/>	_____
Partnership (incl. LLP)				Corporate Resolution	<input type="checkbox"/>	<input type="checkbox"/>	_____
Partnership Agreement, or	<input type="checkbox"/>	<input type="checkbox"/>	_____	Corporation (Non-Profit)			
Business License	<input type="checkbox"/>	<input type="checkbox"/>	_____	Statement of Domestic	<input type="checkbox"/>	<input type="checkbox"/>	_____
Fictitious Name Statement	<input type="checkbox"/>	<input type="checkbox"/>	_____	Non-Profit Corporation			
Tax ID# Letter from IRS	<input type="checkbox"/>	<input type="checkbox"/>	_____	Tax Exemption Certificates	<input type="checkbox"/>	<input type="checkbox"/>	_____
Voluntary Association				Ltd. Liability Co. (LLC)			
Bylaws, Resolution or	<input type="checkbox"/>	<input type="checkbox"/>	_____	Articles of Organization	<input type="checkbox"/>	<input type="checkbox"/>	_____
Articles of Association				Domestic LLC Resolution	<input type="checkbox"/>	<input type="checkbox"/>	_____
Business License	<input type="checkbox"/>	<input type="checkbox"/>	_____	Operating Agreement	<input type="checkbox"/>	<input type="checkbox"/>	_____
Fictitious Name Statement	<input type="checkbox"/>	<input type="checkbox"/>	_____	Legal Trust			
Meeting Minutes	<input type="checkbox"/>	<input type="checkbox"/>	_____	Trust Documentation	<input type="checkbox"/>	<input type="checkbox"/>	_____

Account Major/Minor:	Account #:	
Check Design:	ChexSystems:	
Employee:	Date:	Verified By:



New Account Information Form: Person

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding 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, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

PERSONAL INFORMATION

Name:	SSN:
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Residence Address: <i>(Street)</i>
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City:	State:	Zip:
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Mailing Address, if different: <i>(Street or P.O. Box)</i>
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City:	State:	Zip:
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Home Phone:	Work Phone:
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Home Fax:	Cell Phone:
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Email:

Birth Date:	Mother's Maiden Name:
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Driver's License #: <i>(or other primary ID)</i>	State of Issue:	Issue Date:	Expiration Date:
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Second ID:	Lived in what state for the last 5 years?
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REFERENCE ACCOUNT

Name of Organization or Joint Owner:

FOR BANK USE ONLY – ID VERIFICATION

	<i>Scanned</i>	<i>Viewed</i>	<i>Expire Date</i>
California Driver License	<input type="checkbox"/>	<input type="checkbox"/>	_____
California (DMV) Identification Card	<input type="checkbox"/>	<input type="checkbox"/>	_____
California (DMV) Senior Citizen Identification Card	<input type="checkbox"/>	<input type="checkbox"/>	_____
US Military Identification Card Division: _____	<input type="checkbox"/>	<input type="checkbox"/>	_____
US Passport	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other*: _____	<input type="checkbox"/>	<input type="checkbox"/>	_____

*A supervisor must review and approve the use of identification other than those issued by California DMV, US Military or US Passport Office.

IF ACCOUNT IS PART OF A TRUST, a separate *New Account Information Form: Organization (CBOSJ BR004o)* must be filled out and trust documentation must be obtained.

Account Major/Minor:	Account #:
Check Design:	ChexSystems:
Employee:	Date: _____ Verified By: _____