



Bank Number: _____
(to be completed by bank employee)

Social Security No.: _____

ACCOUNT HOLDER INFORMATION

Name: _____
Legal Address: _____
City: _____ State: _____ Zip Code: _____
Country: _____ Date of Birth: _____
Home Phone: _____ Business Phone: _____

IDENTITY CERTIFICATIONS

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING NEW ACCOUNTS AT KEY

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 customer who opens an account. Therefore, all new and existing customers are subject to the identity verification requirements. When a customer opens an account with any entity within the KeyCorp family of companies, we will ask for their name, address and identification number, and, in the case of an individual, his or her date of birth. For trusts and estates, we may also obtain this information for individuals associated with the trust or estate. In all cases, Key is committed to protecting the privacy and identity of each of its customers.

Failure to supply this required information will prohibit us from completing this request.
(Please refer to List A, Customer Identifying Documents for Individuals for acceptable types of ID).

What type of ID is this? _____ ID Number: _____
What state/country issued it? _____ Indicate the following:
Expiration Date: _____ Issue Date: _____

ALL SECTIONS MUST BE COMPLETED

NRA / VISA / OFAC

What is your country (countries) of citizenship? _____
What is your country of permanent residence? _____

SOURCE OF INCOME

Which options best describe your current sources of income?
(Check all that apply)

<input type="checkbox"/> Employment	<input type="checkbox"/> Trust Beneficiary	<input type="checkbox"/> Investments
<input type="checkbox"/> Social Security Pension	<input type="checkbox"/> Disability	<input type="checkbox"/> Public Assistance
<input type="checkbox"/> Real Estate	<input type="checkbox"/> Inheritance	<input type="checkbox"/> No Income
<input type="checkbox"/> Other		

If other, please describe: _____

KeyBank representative send the completed and authorized document to 2163576029@fax.keybank.com. Clients should fax documents to 2163576029.



Customer Identification Form

OCCUPATION AND INDUSTRY

Which option best describes your primary employment status?
(Check one)

- Hourly Self-employed Student Manager/Executive
- Retired Unemployed Salary/Non-Manager Business Owner/Partner

Employer Name: _____

What is your occupation classification?
(Select and input information from list B)

Is your employer engaged in any of the following industries?

- Adult Entertainment Cannabis Internet Gambling Internet Cafe
- Payday/Title Lending None of these apply

POLITICALLY EXPOSED PERSON

Do any of the following apply to you? (Note: A close associate includes, but is not limited to, accountant, attorneys, business partners, and/or oligarchs. (i.e., a wealthy individual with a great deal of political influence))

- I am an immediate family member of someone who holds or has held a high position in a foreign government.
- I am a close associate of someone who holds or has held a high position in a foreign government.
- I hold or have held a high position in a foreign government.
- Transactions in my account will involve dealings with any of the above.
- None of these apply.

SIGNATURES

Customer Signature

Date:

KeyBank representative send the completed and authorized document to 2163576029@fax.keybank.com. Clients should fax Notarized documents to 2163576029.



Customer Identification Form

A. Customer Identifying Documents for Individuals (must have a photo and be unexpired to be a primary form of ID)

U. S. Passport
Foreign Passport (*including Mexican and Canadian*)
U. S. Military ID Card
U. S. State Driver's License
Canadian Driver's License
Mexican Driver's License
Native American Tribal Identification Card
Mexican Matricula Consular Identification Card
U. S. State ID Card (*issued to residents of a U.S. State*)
Permanent Resident Card (Green Card) (Form I-551)

B. List of Occupation Classifications

Architecture and engineering occupations
Armed Forces
Arts, design, entertainment, sports, and media occupations
Building and grounds cleaning and maintenance occupations
Business and financial operations occupations
Community and social service occupation
Computer and mathematical science occupations
Construction and extraction occupations
Education, training, and library occupations
Farming, fishing, and forestry occupations
Food preparation and serving related occupations
Government related occupations
Healthcare practitioners - doctors and dentists
Other healthcare practitioners - i.e. nurses, lab technicians, physical therapy, dental hygienists, etc.
Installation, maintenance, and repair occupations
Legal occupations
Life, physical, and social science occupations
Management occupations
Office and administrative support occupations
Personal care and service occupations
Production occupations
Protective service occupations
Sale and related occupations
Transportation and material moving occupations