



Business Accounts

REQUIRED DOCUMENTS:

Corporation:

- Copy of Articles of Incorporation
- Corporate Resolution executed by Corporate Secretary
- Copy of Florida Department of State Registration
- Tax ID #
- Copy of all signers driver's licenses and social security numbers

Unincorporated Association:

- Unincorporated association resolution
- Minutes from meeting authorizing the bank account
- Letter from the association's president naming the officers of the association and their signatory powers
- Employers Identification Number (ENI)
- Copy of all signers driver's licenses and social security numbers

Sole Proprietorship:

- Copy of Fictitious Name Filing
- Copy of Florida Department of State Registration
- Copy of Business License / Occupational License in counties where a license is required
- Copy of driver's license and social security number

Partnership Resolution:

- Copy of Partnership Agreement
- Copy of Florida Department of State Registration
- Copy of Partnership Resolution
- Tax ID #
- Copy of all signers driver's licenses and social security numbers

DBA Account:

- Copy of Fictitious Name Filing
- Copy of Occupational License
- Copy of driver's license and social security number

Limited Liability Company (LLC):

- Copy of Articles of Agreement
- Tax ID #
- Copy of all signers driver's licenses and social security numbers

Non-Profit:

- IRS Form 501C3
- State Registration
- Copy of driver's license and social security number

Name of Business: _____

Occupation: _____

Street Address: _____

Mailing Address (if different): _____

E-mail Address: _____ Tax ID #: _____

Phone: _____ Fax: _____

Authorized Signer #1: _____
Social Security #: _____ Driver's License: _____
Address: _____
Employer: _____ Occupation: _____
DOB: _____ E-mail: _____
Home Phone: _____ Work Phone: _____

Authorized Signer #2: _____
Social Security #: _____ Driver's License: _____
Address: _____
Employer: _____ Occupation: _____
DOB: _____ E-mail: _____
Home Phone: _____ Work Phone: _____

Authorized Signer #3: _____
Social Security #: _____ Driver's License: _____
Address: _____
Employer: _____ Occupation: _____
DOB: _____ E-mail: _____
Home Phone: _____ Work Phone: _____

Authorized Signer #4: _____
Social Security #: _____ Driver's License: _____
Address: _____
Employer: _____ Occupation: _____
DOB: _____ E-mail: _____
Home Phone: _____ Work Phone: _____

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1812 Martin Luther King Jr. Blvd.
Tallahassee, FL 32303
(850) 222-2488 • (850) 222-2363 Fax

ProBank will not accept applications from persons under 18 years of age.

Please check the appropriate box and note the required documents:

To process your application quickly, please make sure:

- All of the above information is filled in correctly.
- To bring in, or fax, your driver's license.
- To bring in, or fax, your social security card or any form of ID showing the individual's social security number.

Employee Signature: _____ Date: _____
