## **Certification of Beneficial Owners for Legal Entity Customers**

This form is required by federal regulations as a means to identify and document information for individuals who own and/or control a legal entity.

To help the government fight financial crime, federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers. A legal entity includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in The United States of America or a foreign country. A legal entity does not include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

Please provide a copy of the driver's license (U.S. individuals only) or other identification document (passport or similar identification document in the case of a foreign individual) for each beneficial owner and for the authorized individual with significant management responsibility as identified in this form.

**Legal Entity Information** (If you are unable to complete this form electronically, please print legibly in blue or black ink.)

Entity Name			
	I	1	I
Entity Street Address	City	State	Zip code
	1		
Legal Name of Individual Establishing Enterprise Bank Relationship		Title of Individual Establishing En	terprise Bank Relationship
Beneficial Owners Identify each individual who owns—directly or indirectly the otherwise—25% or more of the equity interests of the leg	hrough any agreemen al entity.	t, arrangement, understandir	ıg, relationship, or
☐ Check this box if no individual owns 25% or more of assumes 25% or more ownership	the legal entity and th	at you will inform Enterprise	Bank if/when an individua
☐ Beneficial Owner 1 Check this box if this owner is	also the authorized in	dividual with significant mana	agement responsibility.
Individual Legal Name			
Street Address			
0		<u>_</u>	
City	State	Zip code	Country
Social Security Number	Date of	Birth	
	I	1	I
ID Type / Number	ID Issued By	ID Issue Date	ID Expiration Date
71	,		•
☐ Beneficial Owner 2 Check this box if this owner is	also the authorized in	dividual with significant mana	agement responsibility.
ndividual Legal Name	<del></del>		
Street Address			
011 001 / 1ddi 000			
City	State	Zip code	Country
	1		
Social Security Number	Date of	Birth	
•		<u>.</u>	
ID T. AND I			<u> </u>
ID Type / Number	ID Issued By	ID Issue Date	ID Expiration Date

## **Certification of Beneficial Owners for Legal Entity Customers** Beneficial Owner 3 Check this box if this owner is also the authorized individual with significant management responsibility. Individual Legal Name Street Address City State Zip code Country Social Security Number Date of Birth ID Type / Number ID Issued By ID Expiration Date ID Issue Date Check this box if this owner is also the authorized individual with significant management responsibility. Individual Legal Name Street Address City Zip code State Country Date of Birth Social Security Number ID Type / Number ID Issued By ID Issue Date **ID Expiration Date** Authorized Individual with Significant Management Responsibility (Control Person) Provide information for one individual with significant responsibility for managing the legal entity (ex: CEO, CFO, managing member, general partner, president, treasurer, etc.). If this individual is noted as an owner above, only the name and title are required. Individual Legal Name Position Title Street Address City State Zip code Country Social Security Number Date of Birth ID Type / Number ID Issued By **ID** Issue Date **ID Expiration Date** Certification hereby certify to the best of my knowledge that the information provided above is complete and correct. In addition, I agree to notify Enterprise Bank of any change in Beneficial Owner or Control Person information listed above.

Date

Primary Applicant