



METROPOLITAN BANK
加州金城銀行

Business Banking Registration Form

Company Information

Company Name _____

Tax ID _____ Registration Date _____

Address _____ City _____ State _____ Zip _____

Contact Person _____ Phone _____ Email _____

Company Administrator

Name _____ Email _____ Date of Birth _____

Phone (Work) _____ (Mobile) _____ (Other) _____

Security Question _____

Security Answer _____

Accounts

Account	Account Type	Account Number	Name on the Account
1			
2			
3			
4			
5			
6			

Authorization

Signature _____ Date _____

(Legal disclosure indicating the customer agrees with any terms and disclosures and this document is signed by an authorized individual at the company.)

Bank Use Only

Reviewed By _____ Date _____ Approved By _____ Date _____