

Application For Personal Trust Or Estate Account/Services

Union National Bank 101 E. Chicago Street, Elgin, IL 60120 847-888-7500 Fax 847-888-2662 Member FDIC

Please Check One Box And Complete All Information:

- Personal Trust Account¹ ¹Requires Copies Of The Title Page, Signature Page, And Banking Authority Page From Formal Trust Agreement.
- Estate Account - Executor² ²Requires Certified Copy Of Death Certificate, Plus Either; 1) Certified Copy Of Probate Court Order
- Estate Account - Administrator² ²Appointing Executor/Administrator; Or 2) Small Estate Affidavit. ³No Formal Trust Document Required.

If Formal Trust Or Estate, Full Legal Name _____

Custodial/Informal Trust³ Beneficiary Full Name _____ Beneficiary Date of Birth _____

³Is account an irrevocable gift under Uniform Transfers/Gifts To Minors Act & beneficiary controls account at age 18? (Check One) Yes No

Tax ID _____ 1099s Issued Under This Tax ID. Backup Withholding: Am Not Subject To It¹ Exempt² Nonresident Alien³

Please Have All Trustees/Executors/Administrators/Custodian Print All Information And Then Sign By The X:

Name 1 _____ SSN/Tax ID _____ Signature*¹ **X**

Address _____ City _____ ST _____ Zip _____

Date of Birth _____ D/L State & Number _____ Mother's Maiden Name _____

Daytime Phone _____ Evening Phone _____ Employer _____

Name 2 _____ SSN/Tax ID _____ Signature* **X**

Address _____ City _____ ST _____ Zip _____

Date of Birth _____ D/L State & Number _____ Mother's Maiden Name _____

Daytime Phone _____ Evening Phone _____ Employer _____

Name 3 _____ SSN/Tax ID _____ Signature* **X**

Address _____ City _____ ST _____ Zip _____

Date of Birth _____ D/L State & Number _____ Mother's Maiden Name _____

Daytime Phone _____ Evening Phone _____ Employer _____

Check Box If More Than 1 Signature Required To Withdraw. Number Required _____.

Convert Existing Account # _____ To Trust Ownership Request Processed By _____ On ____/____/____.

All joint account owners must remove their names from existing account prior to conversion. Use Personal Change Application.

Select Deposit Account Type:

- Personal Classic Checking (001) Personal Classic NOW (025) Personal Superior NOW (027) Personal Money Market (037)
- Personal Classic Savings (040) 1 Month CD (072) 2 Month CD (080) 3 Month CD (070)
- 6 Month Regular CD (067) 12 Month Regular CD (066) Custom Term CD of _____ Days or Months (069)

For CDs, Select One: Add Interest To Balance Send Interest Check Credit My Union National Bank Account _____

For CDs, Select One: Monthly Interest Quarterly Interest Interest At Maturity(Available only if term is 12 months or less.)

Opening Information - Bank Use: Account Number _____ Date Opened _____ Initial Deposit \$ _____

Initial Rate _____ Initial APY _____ Initial Maturity _____ By _____

Source _____ Reason _____

ATM/Debit Card For The Above Account - Select One:

- Cash Station ATM Card For Name # _____ And Name # _____. - Available Only For Checking, NOW, Savings And Money Market Accounts.
- Visa Debit Card For Name # _____ And Name # _____. - Available Only For Checking, NOW And Money Market Accounts.

RediChek Line of Credit and Overdraft Protection

We apply for a Line of Credit in the amount of: \$500 \$1000 \$2000 \$3000 \$ _____ Monthly Gross Income \$ _____

Rent Own Home Monthly Rent/Mortgage Payment \$ _____ • Debit Payments From Account # _____

Alimony, child support, separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Alimony, child support, separate maintenance received under : Court Order Written Agreement Oral Understanding Amount \$ _____

Trustees Personally Guarantee Lines Of Credit. Trustee Agrees By Signing Above.

Bank Use: Approved Declined Amount\$ _____ Date _____ By _____

Safe Deposit Box Rental:

All boxes 22" long. Box height/width: 3x5 (1) 3x11 (2) 5x5 (7) 4x11(3) 5x11(8) 10x11(4) 10x15 (5) 10x16 (6).

Union National Bank Deposit Account To Debit For Automatic Rental Payments _____

Bank Use: Box Number _____ Rent Payment Received \$ _____ Key Deposit Received \$ _____ Date _____ By _____

***Signatures.** My signature acknowledges receipt of the Union National Bank Owner's Manual, including all applicable disclosures. This application is subject to all agreements, rules and regulations adopted by the Bank for the services or credit line applied for. I agree to be bound by them. **Substitute W-9 Certificate.** ¹Under penalties of perjury, I certify that my Social Security/Tax ID number listed on this form is correct, and that I am not subject to backup withholding as a result of a failure to report all interest and dividends or because the Internal Revenue Service has notified me that I am no longer subject to backup withholding. ²I am an exempt recipient under the Internal Revenue Service Regulations. ³I am not a United States person, and I am not a citizen nor a resident of the United States. (w:\docs\disclose\trustapp.doc) 09/21/16 11:57:41 AM