



# Small Business Account Application

Business Information	
Business Legal Name	Trade Name (if applicable)
Date Business was Established	Preferred Language <input type="checkbox"/> English <input type="checkbox"/> French
Business Structure (i.e. Corporation/Partnership, Formal Trust)	
Place of Incorporation Issuance (for Incorporated Organizations only)	
Incorporated in: <input type="checkbox"/> Canada                      - OR - <input type="checkbox"/> United States, Specify State <input type="checkbox"/> Federally <input type="checkbox"/> Mexico <input type="checkbox"/> Provincially <input type="checkbox"/> Europe <input type="checkbox"/> Elsewhere: Specify Country	
Registered Corporation Number:	
Describe Primary Activity of the Business (e.g. Retail Donut Shop, Wholesale Flower Distributor, Importer of Agricultural Supplies)	
Operations in Other Countries Does the Organization conduct business with companies/individuals located outside of Canada? <input type="checkbox"/> Yes <input type="checkbox"/> No - OR - Does the Organization have operations located outside of Canada? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Business Address and Contact Information			
Street Address			
City	Province/State	Country	Postal Code
Mailing Address (if different than above)			
City	Province/State	Country	Postal Code
Phone		Fax	
Primary Contact Name: Phone: Email:		Alternate Contact Name: Phone: Email:	

**Business Ownership**

<b>Name of Business Owner 1</b>	<b>Name of Business Owner 2</b>
<b>% Ownership</b>	<b>% Ownership</b>

**Business Owner 1**

<b>RBC Client Card #</b> (if an RBC client)		<b>Preferred Language</b> <input type="checkbox"/> English <input type="checkbox"/> French	
<b>Salutation</b> <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr.		<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	
<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b>	
<b>Date of Birth</b> (mm/dd/yyyy)	<b>Occupation</b>		
<b>Home Street Address</b>			
<b>City</b>	<b>Province</b>	<b>Postal Code</b>	
<b>Identification 1 (Mandatory)</b> I.D. must be presented to RBC employee.			
<b>Type</b>	<b>Reference Number</b>	<b>Place of Issue</b>	
<b>Citizenship</b> (Required for Foreign Passports, IMM1000, IMM1442, IMM5292, Permanent Resident Card, Foreign National Card)			
<b>Expiry Date:</b>	<b>Country:</b>	<b>Province/Sate:</b>	
<b>Identification 2 (Mandatory)</b> I.D. must be presented to RBC employee.			
<b>Type</b>	<b>Reference Number</b>	<b>Place of Issue</b>	
<b>Citizenship</b> (Required for Foreign Passports, IMM1000, IMM1442, IMM5292, Permanent Resident Card, Foreign National Card)			
<b>Expiry Date:</b>	<b>Country:</b>	<b>Province/Sate:</b>	
<b>Personal Contact Information (Optional)</b>			
<b>Home Phone</b>	<b>Cellular Phone</b>	<b>Email</b>	

**Business Owner 2**

<b>RBC Client Card #</b> (if an RBC client)		<b>Preferred Language</b> <input type="checkbox"/> English <input type="checkbox"/> French	
<b>Salutation</b> <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr.		<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	
<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b>	
<b>Date of Birth</b> (mm/dd/yyyy)	<b>Occupation</b>		
<b>Home Street Address</b>			
<b>City</b>	<b>Province</b>	<b>Postal Code</b>	
<b>Identification 1 (Mandatory)</b> I.D. must be presented to RBC employee.			
<b>Type</b>	<b>Reference Number</b>	<b>Place of Issue</b>	
<b>Citizenship</b> (Required for Foreign Passports, IMM1000, IMM1442, IMM5292, Permanent Resident Card, Foreign National Card)			
<b>Expiry Date:</b>	<b>Country:</b>	<b>Province/Sate:</b>	
<b>Identification 2 (Mandatory)</b> I.D. must be presented to RBC employee.			
<b>Type</b>	<b>Reference Number</b>	<b>Place of Issue</b>	
<b>Citizenship</b> (Required for Foreign Passports, IMM1000, IMM1442, IMM5292, Permanent Resident Card, Foreign National Card)			
<b>Expiry Date:</b>	<b>Country:</b>	<b>Province/Sate:</b>	
<b>Personal Contact Information (Optional)</b>			
<b>Home Phone</b>	<b>Cellular Phone</b>	<b>Email</b>	

**Business Authorities and Authorized Signing Officers:** Personal Information and 2 pieces of verified I.D. are required for all Signing Officers. A maximum of three Signing Officers may be assigned.

<b>Authorized Signing Officer 1</b>		
<b>RBC Client Card #</b> (if an RBC client)		<b>Preferred Language</b> <input type="checkbox"/> English <input type="checkbox"/> French
<b>Salutation</b> <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr.		<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female
<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b>
<b>Date of Birth</b> (mm/dd/yyyy)	<b>Occupation</b>	
<b>Home Street Address</b>		
<b>City</b>	<b>Province</b>	<b>Postal Code</b>
<b>Identification 1 (Mandatory)</b> I.D. must be presented to RBC employee.		
<b>Type</b>	<b>Reference Number</b>	<b>Place of Issue</b>
<b>Citizenship</b> (Required for Foreign Passports, IMM1000, IMM1442, IMM5292, Permanent Resident Card, Foreign National Card)		
<b>Expiry Date:</b>	<b>Country:</b>	<b>Province/Sate:</b>
<b>Identification 2 (Mandatory)</b> I.D. must be presented to RBC employee.		
<b>Type</b>	<b>Reference Number</b>	<b>Place of Issue</b>
<b>Citizenship</b> (Required for Foreign Passports, IMM1000, IMM1442, IMM5292, Permanent Resident Card, Foreign National Card)		
<b>Expiry Date:</b>	<b>Country:</b>	<b>Province/Sate:</b>
<b>Personal Contact Information (Optional)</b>		
<b>Home Phone</b>	<b>Cellular Phone</b>	<b>Email</b>

<b>Authorized Signing Officer 2</b>		
<b>RBC Client Card #</b> (if an RBC client)		<b>Preferred Language</b> <input type="checkbox"/> English <input type="checkbox"/> French
<b>Salutation</b> <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr.		<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female
<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b>
<b>Date of Birth</b> (mm/dd/yyyy)	<b>Occupation</b>	

<b>Home Street Address</b>		
<b>City</b>	<b>Province</b>	<b>Postal Code</b>
<b>Identification 1 (Mandatory)</b> I.D. must be presented to RBC employee.		
<b>Type</b>	<b>Reference Number</b>	<b>Place of Issue</b>
<b>Citizenship</b> (Required for Foreign Passports, IMM1000, IMM1442, IMM5292, Permanent Resident Card, Foreign National Card)		
<b>Expiry Date:</b>	<b>Country:</b>	<b>Province/Sate:</b>
<b>Identification 2 (Mandatory)</b> I.D. must be presented to RBC employee.		
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<b>Citizenship</b> (Required for Foreign Passports, IMM1000, IMM1442, IMM5292, Permanent Resident Card, Foreign National Card)		
<b>Expiry Date:</b>	<b>Country:</b>	<b>Province/Sate:</b>
<b>Personal Contact Information (Optional)</b>		
<b>Home Phone</b>	<b>Cellular Phone</b>	<b>Email</b>

### Authorized Signing Officer 3

<b>RBC Client Card #</b> (if an RBC client)	<b>Preferred Language</b> <input type="checkbox"/> English <input type="checkbox"/> French	
<b>Salutation</b> <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr.	<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	
<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b>
<b>Date of Birth</b> (mm/dd/yyyy)	<b>Occupation</b>	
<b>Home Street Address</b>		
<b>City</b>	<b>Province</b>	<b>Postal Code</b>
<b>Identification 1 (Mandatory)</b> I.D. must be presented to RBC employee.		
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<b>Citizenship</b> (Required for Foreign Passports, IMM1000, IMM1442, IMM5292, Permanent Resident Card, Foreign National Card)		
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<b>Identification 2 (Mandatory)</b> I.D. must be presented to RBC employee.		
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<b>Citizenship</b> (Required for Foreign Passports, IMM1000, IMM1442, IMM5292, Permanent Resident Card, Foreign National Card)		
<b>Expiry Date:</b>	<b>Country:</b>	<b>Province/State:</b>
<b>Personal Contact Information (Optional)</b>		
<b>Home Phone</b>	<b>Cellular Phone</b>	<b>Email</b>

## Account Activity

Complete an account table for each account required.

<b>Account 1</b>		
<b>Account Currency</b> <input type="checkbox"/> CAD <input type="checkbox"/> USD	<b>Transit #</b>	<b>Account #</b>
<b>Purpose of Account</b> Select one <input type="checkbox"/> General Operations <input type="checkbox"/> Investment <input type="checkbox"/> Holding Company	<b>Anticipated Activity</b> Select all that apply <input type="checkbox"/> Cash on Deposit > \$30,000/month <input type="checkbox"/> Total Incoming / Outgoing Wires > \$30,000/month <input type="checkbox"/> Negotiable Items on Deposit > \$50,000/month <input type="checkbox"/> N/A	<b>Initial Deposit</b> Select all that apply <input type="checkbox"/> Cash in Excess of \$10,000 <input type="checkbox"/> Wires in Excess of \$50,000 <input type="checkbox"/> Negotiable Item in Excess of \$50,000 <input type="checkbox"/> N/A <b>Source of Initial Deposit</b> Select all that apply <input type="checkbox"/> Family <input type="checkbox"/> Foreign Exchange <input type="checkbox"/> Inheritance <input type="checkbox"/> Deposit/Investment with RBC: <input type="checkbox"/> Business <input type="checkbox"/> Personal <input type="checkbox"/> Deposit/Investment with Other FI's: <input type="checkbox"/> Business <input type="checkbox"/> Personal <input type="checkbox"/> Lottery <input type="checkbox"/> Personal Income <input type="checkbox"/> Proceeds from Existing Business <input type="checkbox"/> Sale of Existing Business <input type="checkbox"/> Severance <input type="checkbox"/> Venture Capital
Will this account be used by or on behalf of a third party? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Account 2		
<b>Account Currency</b> <input type="checkbox"/> CAD <input type="checkbox"/> USD	<b>Transit #</b>	<b>Account #</b>
<b>Purpose of Account</b> Select one <input type="checkbox"/> General Operations <input type="checkbox"/> Investment <input type="checkbox"/> Holding Company	<b>Anticipated Activity</b> Select all that apply <input type="checkbox"/> Cash on Deposit > \$30,000/month <input type="checkbox"/> Total Incoming / Outgoing Wires > \$30,000/month <input type="checkbox"/> Negotiable Items on Deposit > \$50,000/month <input type="checkbox"/> N/A	<b>Initial Deposit</b> Select all that apply <input type="checkbox"/> Cash in Excess of \$10,000 <input type="checkbox"/> Wires in Excess of \$50,000 <input type="checkbox"/> Negotiable Item in Excess of \$50,000 <input type="checkbox"/> N/A <b>Source of Initial Deposit</b> Select all that apply <input type="checkbox"/> Family <input type="checkbox"/> Foreign Exchange <input type="checkbox"/> Inheritance <input type="checkbox"/> Deposit/Investment with RBC: <input type="checkbox"/> Business <input type="checkbox"/> Personal <input type="checkbox"/> Deposit/Investment with Other FI's: <input type="checkbox"/> Business <input type="checkbox"/> Personal <input type="checkbox"/> Lottery <input type="checkbox"/> Personal Income <input type="checkbox"/> Proceeds from Existing Business <input type="checkbox"/> Sale of Existing Business <input type="checkbox"/> Severance <input type="checkbox"/> Venture Capital
Will this account be used by or on behalf of a third party? <input type="checkbox"/> Yes <input type="checkbox"/> No		

▼ For RBC Internal Use ▼

Administration		
<b>Standard Industry Code (SIC)</b>	<b>Statutory Report Codes (SRC)</b>	<b>Business Segmentation Code (BSC)</b>
<b>Responsibility Transit (if applicable)</b>		<b>Account Manager Number (if applicable)</b>

**Notes:** If account(s) will be used by or on behalf of a third party, complete form 2713.  
 If the Business has Directors, complete a Form 218 to record the names and occupations of the Directors.