Third Party declaration

In the event, any customer named below indicates (or it is otherwise determined) they are acting on behalf of a third party individual or entity), the following information about that third party must be recorded and forwarded to Bridgewater Bank:

|  |  |  |  |
| --- | --- | --- | --- |
| Customer Name: |  | | |
| Address: |  | | |
| **Phone Number:** |  | **Date of Birth:** |  |
| Joint Customer Name: |  | | |
| Address: |  | | |
| **Phone Number:** |  | **Date of Birth:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **INFORMATION ABOUT THE THIRD PARTY – INDIVIDUAL** | | | | | |
| **Surname:** |  | **Given Name:** |  | **Initial(s):** |  |
| **Address:** |  | | | | |
| **City:** |  | **Province:** |  | **Postal Code:** |  |
| **Country of Residence:** |  | **Home Phone #:** |  | **Date of Birth:** |  |
| **Occupation/Nature of Business:** |  | **Relationship to the Customer(s):** |  | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **INFORMATION ABOUT THE THIRD PARTY – ENTITY** | | | | | | | |
| **Name of Business/Entity:** |  | | | | | | |
| **Address:** |  | | | | | | |
| **City:** |  | | **Province:** |  | **Postal Code:** |  | |
| **Nature of Business:** |  | | | | | | |
| **Incorporation Number:** |  | **Place of Incorporation:** | |  | **Date of Incorporation:** | |  |
| **Relationship to the Customer(s):** |  | | | | | | |

If any customer named above does not indicate that the transaction is being conducted on behalf of a third party individual or entity, but there are reasonable grounds to suspect that is the case, describe the reasonable grounds:

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| --- | --- | --- | --- |
| **Signature:** |  | **Date:** |  |