

# ACCOUNT APPLICATION

Please complete and return to TDS via fax or email

## Owner Information

Customer Name / Company Name

Fed Tax ID (if a company)

Additional authorized Signer

Type of Entity:  Individual  LLC  Trust  Corporation  Partnership  Other (please explain below)

Billing Address

State or Province

Country

Zip or Postal Code

Office #

Cell #

Fax #

Emergency #

Email

Referring Company / Institution:

## Required documentation - to be used solely for verification purposes

If an individual:  copy of International or US Passport or copy of US Drivers License

If a business entity:  Copy of International or US Passport or US Drivers License - for each owner owning 10% or more of the entity  
 Copy of Articles of Incorporation or Formation Agreement

The undersigned hereby represents: the above information is true, correct and complete; and that the undersigned is the legal and beneficial owner of the assets to be deposited. The undersigned agrees to inform TDS, of his own accord, of any changes to the above information. By signing this application, the undersigned further represents they have read and hereby agrees to be bound by the terms and conditions of the Precious Metals Storage Agreement and authorizes TDS to obtain a credit report.

Signature

Date

Signature (if applicable)

Date