

**A-1 Block Corporation**  
**BANKING INFORMATION REQUEST**  
For Questions; Email: [AP@A1BLOCK.COM](mailto:AP@A1BLOCK.COM)

**Please have your bank complete this form and email it to A-1 Block Corporation at: [AP@A1BLOCK.COM](mailto:AP@A1BLOCK.COM)**

**Customer Complete This Section**

\_\_\_\_\_  
**Firm/Customer Name**

\_\_\_\_\_  
**Signature of Owner, Partner, Principal or Officer**

\_\_\_\_\_  
**Print Name of Owner, Partner, Principal or Officer**

**Bank Complete This Section**

**Bank Representative:** \_\_\_\_\_

1. \_\_\_\_\_  
Name of Institution                      Street                                      City                      State      Zip

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Date Checking Account Opened: \_\_\_\_\_ Three Month Average Balance: \$ \_\_\_\_\_

Any Returned checks (NSF) in the Last 12 Months:  Yes     No    If yes, How Many \_\_\_\_\_

Date Savings Account Opened: \_\_\_\_\_ Three Month Average Balance: \$ \_\_\_\_\_

Loan(s): Number of Loans: \_\_\_\_\_ Experience Since Opened: \_\_\_\_\_

Highest Loan Amount \$ \_\_\_\_\_ Last Open: \_\_\_\_\_

Security: \_\_\_\_\_ Personal Guaranty:  Yes     No

**Banking Signature or Bank Stamp:** \_\_\_\_\_

**Banking Direct Email:** \_\_\_\_\_