



**THE BERKSHIRE BANK**

*The Bank that puts your interest first*

4 East 39<sup>th</sup> Street, New York, NY 10016  
Tel: (212) 802-1000 Fax: (212) 481-0815

**BerkOnline® Application**

**View Only**  
 **View & Transfer**  
(Select one option only)

Name/Company Name: \_\_\_\_\_

Contact Name (For Business Accounts): \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Facsimile: \_\_\_\_\_

Evening Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Social Security/Tax Identification Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Additional Account Holder (if applicable): \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**Please link the following accounts for my BerkOnline® access.**

**I confirm that these accounts all have the same legal ownership and signatories.**

	<u>Account Names and Numbers</u>	<u>Signatories on Accounts</u>	<u>Date Opened</u>
1.	_____	_____	_____
	_____	_____	_____
2.	_____	_____	_____
	_____	_____	_____
3.	_____	_____	_____
	_____	_____	_____

(Please attach additional sheets for additional linked accounts.)

**Authorized Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For Official Use Only**

\_\_\_\_\_  
**Platform Verification**  
\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**User ID**

\_\_\_\_\_  
**Branch Manager Approval**  
\_\_\_\_\_  
**Date**

**All Documentation on File – Branch Manager Signature** \_\_\_\_\_