

Opening of a Land Trust

A new Federal Law requires that all financial institutions need to obtain, verify and record information that identifies each person who opens an account. A copy of the **Driver's License** or **State of Illinois I.D.** for each Primary Beneficiary will now be required.

Trust Number _____ Attorney _____

Dated _____ Phone _____

Property Information

Address of the Property _____

Type of Property _____ Residential _____ Commercial _____ Vacant _____ Apartment (____ No. of Units)

Value of Property \$ _____ Total number of parcels held in the Trust _____

Permanent Index Number (or PIN) _____

Primary Beneficiary (ies)

____ U.S. Resident

____ Non-U.S. Resident

____ Description - Other _____ Country/Issuing Agency (other) _____

Are you a family member or close associate of a foreign political figure? _____ Yes _____ No

Employment Status __ Employed __ Unemployed __ Retired __ Homemaker (if employed- occupation title) _____

1. _____
Name

2. _____
Address

City _____ State _____ Zip Code _____

3. _____
Birth date

4. _____ SSN _____ TIN _____ EIN _____ Other _____
Identification Number

____ U.S. Resident

____ Non-U.S. Resident

____ Description - Other _____ Country/Issuing Agency (other) _____

Are you a family member or close associate of a foreign political figure? _____ Yes _____ No

Employment Status __ Employed __ Unemployed __ Retired __ Homemaker (if employed- occupation title) _____

1. _____
Name

2. _____
Address

City _____ State _____ Zip Code _____

3. _____
Birth date

4. _____ SSN _____ TIN _____ EIN _____ Other _____
Identification Number

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How Property will be held _____ Joint Tenants _____ Tenants in Common _____ Tenants by the Entirety

Power of Direction to be held by: _____

Contingent Beneficiary (ies)

1. _____
 Name

2. _____
 Address

City _____ State _____ Zip Code _____

3. _____ SSN _____ TIN _____ EIN _____ Other _____
 Identification Number

_____ Non-U.S. Resident _____ U.S. Resident

1. _____
 Name

2. _____
 Address

City _____ State _____ Zip Code _____

3. _____ SSN _____ TIN _____ EIN _____ Other _____
 Identification Number

_____ Non-U.S. Resident _____ U.S. Resident

1. _____
 Name

2. _____
 Address

City _____ State _____ Zip Code _____

3. _____ SSN _____ TIN _____ EIN _____ Other _____
 Identification Number

_____ Non-U.S. Resident _____ U.S. Resident

How Property will be held _____ Joint Tenants _____ Tenants in Common _____ Tenants in Common Per Stirpes

****For additional information please use an additional page****

Miscellaneous Information

All Correspondence to be mailed to _____

Tax Bills to be mailed to _____ Same as before _____ To the Trust _____ Other

Phone Number (Home) _____ (Work): _____

Trust Fees	Acceptance Fee \$ _____	Annual Fee \$ _____
	Recording Cost \$ _____	County: _____
	Exemption Cost \$ _____	Village: _____ (if necessary)

Total Trust Fees \$ _____
(2009)