

ABILITIES FINANCE

Private Capital Arrangement – Lender Onboarding Documents

DOCUMENT 4 OF 12

IDENTITY VERIFICATION PACKET

Purpose: Collects basic identification, contact, beneficiary, and recordkeeping data required for the administration of the promissory note.

Section 1: Personal Information

Full Legal Name: _____

Date of Birth (MM/DD/YYYY): _____

Social Security Number / Tax ID: _____

Primary Residential Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

Primary Phone: _____

Email Address: _____

Section 2: Identification Document

Please attach a clear copy of one of the following valid, unexpired government-issued IDs:

State Driver's License

Passport

State ID Card

ID Number: _____ Expiration Date: _____

Section 3: Beneficiary Designation

In the event of my death, I designate the following individual or entity to assume the rights of my Promissory Note:

Beneficiary Name: _____

Relationship to Lender: _____

Beneficiary Phone: _____

Beneficiary Email: _____

Beneficiary Address: _____

Signature

Lender Signature: _____ Date: _____

Governing Law: State of Wyoming

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