

Internal use only: ANB Branch:	
Bank Officer:	
Other:	

Application

Business Name:		
Address:		
Main contact person name:	Title:	
Payroll contact name:	Email address:	
Telephone:	Fax:	
Email address:		
Entity: Sole Proprietor C-Corp	poration S-Corporation LLC Partnership	
Line of Business / Business purpose	s:	
Tax I.D. Number:		
Do you own or control other companies or businesses? Yes No		
Number of full time employees including yourself:		
Adviser Name:	Email address:	
Other Retirement plans currently in existence:		
401(k) Profit Sharing Plan	Defined Benefit Simple SEP/IRA Traditional IRA	
It will take approximately 30 days to process your application. During this time you will be contacted to provide census information which includes; employee name, date of hire, birth date, social security numbers, compensation including bonuses, and hours worked per year (full time / part time / seasonal / leased / contract). We will also discuss options available for you and your company such as appropriate vesting schedules, required contributions, investments and other provisions. Once your application has been processed a time will be scheduled to enroll you and your employees into the plan.		
National Bank of Texas). The applicat	and a check for that amount should accompany the application (made payable to: American tion can be left at any American National Bank of Texas branch or mailed to American National Group, 1010 W. Ralph Hall Parkway, Suite 112, Rockwall, Texas 75032	
	us at 800.837.6584 or visit our web site at www.yourkplan.com. OUR kPlan sponsored by the American National Bank Of Texas; we look forward to serving you.	
Signature		