

**FAIM Account Opening Checklist**

Participant Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FAIM Coach: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Keep in Local File:**

FAIM Application

* review for completion - ALL questions MUST be answered
* make sure it is signed and dated

Income Documentation – one of the following options:

* **Federal 1040 Tax Form – *PREFERRED*: only the first 2 pages are needed unless business income is claimed then the Profit/Loss Statement is also needed**
* ***MN Dept. of Revenue tax form and preparer overview pages are not accepted.***
* W2’s for all employment and any other income (earned and unearned) for the full year
* Pay stubs and any other income (earned and unearned) for the previous 90 days (three FULL months) from the date the application was signed

Contract Agreement

Beneficiary Form

Credit Report

Tennessen Warning

Bremer Release of Information

Certificate for Opening Asset Account

Signature Authorization for Withdrawals

Authorization of Automatic Transfer ***(optional)***

**Send to Bremer:**

Bremer Release of Information

Certificate of Opening Asset Account

Signature Authorization for Withdrawals

Authorization of Automatic Transfer - if completed (optional)

**Send to WCMCA:**

FAIM Application

Income Documentation

Contract Agreement

Beneficiary Form

**Date sent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**