SALISH
WEALTH MANAGEMENT

Account Information Form

Client Information

Name	
Social Security Number	
Date of Birth	
Marital Status	
Citizenship	
Driver License or ID #	
# of Dependents (including self)	

Contact Information

Phone Number	
Email Address	
Mailing Address	
Address of Residence	

Financial Information

Annual Income	
Net Worth	
Liquid Net Worth	
Liabilities	
Tax Bracket	

Investing Background

Known Advisor Since	
Years Investment Experience	
Types of Investments	
Investment Decision Making	

Associations

Affiliated with Broker/Dealer	
10% + Shareholder or Stock	
Officer of Traded Company	

Employment Information

Employer	
Occupation	

Account Needs

Objective and Risk Tolerance	
Time Horizon	
Liquidity Needs	
Account Funding	

Set-up and Maintenance

ACH/Checking Account	
On Demand	
Recurring Distribution	
Document Signatures	

FOR OFFICE USE ONLY

Rep ID		Account Type	
Account Service		If Advisory, Model	
Date Account Opened		Account Number	