

Account Application

Traditional IRA · ROTH IRA

(877) 806-7362 | team@altscustodian.com



Type of Account

Traditional IRA Roth IRA

Account Owner Information

First Name	M.I.	Last Name	
Legal Address	City	State	Zip Code
Mailing Address (if different from above)	City	State	Zip Code
Social Security Number: (###-##-####)	Date of Birth: (MM-DD-YYYY)	Email Address:	
Primary Phone	Type		

Fees Payment

Select your preferred payment method for covering the fees linked to your account. Please consult your Fee Schedule to review all fees relevant to your account.

Debit my account Deduct fees using a Credit Card or ACH

ACCOUNT OWNER AUTHORIZATION

- I have reviewed the Alts Custodian Fee Schedule.
- I have reviewed the Alts Custodian disclosures associated with opening this account.

Federal Law mandates that all financial institutions acquire, verify, and document the identity of every individual opening an account. Therefore, upon opening an account, we will solicit your name, address, date of birth, a photocopy of your driver's license or passport, and additional details facilitating identification.

By signing below, I attest to the accuracy and truthfulness of all information provided in this Application. I acknowledge the terms and conditions governing this account and consent to their binding effect.

Signature:	Date:
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