



**Client Services** | 888.990.7892  
 E. info@ptcemail.com  
 F. 702.946.0136  
 W. www.preferredtrustcompany.com  
 6700 Via Austi Parkway, Suite 301  
 Las Vegas, NV 89119

# IRA Account Owner Information Request Form

Traditional | Roth | SEP | SIMPLE

PTC IRA Account Number

**NOTE:** A \$100.00 IRA Service Fee will be applied according to your selection below:

Deduct fee(s) from my IRA Account

Charge by credit card on file

By selecting charge credit card on file, you authorize Preferred Trust Company to charge your credit card for service-related fee(s) associated with this transaction and subsequent fees should your IRA cash balance not be sufficient to pay outstanding fees while maintaining the required minimum cash balance. If you do not have a credit card on file you must complete a **Credit Card Authorization Form**. You can request the form by sending an email to info@ptcemail.com.

## SECTION 1 | IRA Account Owner Information

First Name  Last Name  Last 4 Digits of SSN  DOB (MM/DD/YY)

Daytime Phone Number  Email Address

## SECTION 2 | Request for Account Documents

All requests for account documentation must be submitted in writing to the Client Services Department. Documents requested below will be sent to the email address associated with the IRA account unless otherwise indicated below. Please be sure to include the mailing address or email address where the documents should be sent if different than the address or email associated with the IRA account.

Please indicate in the space below the specific documents for which you would like a copy.

Documents Requested

**Documents will be sent to the email address on record, unless otherwise indicated below.**

Alternative Email Address

## SECTION 3 | Acknowledgement

Signature of IRA Account Owner

Date

### INTERNAL USE ONLY

**Verified**  
(Initials and Date)