

5 pgs
J.P.Morgan

Special Consideration Form

Instructions: For Consumer and Business Card, fax completed form and application to 1-877-870-0020.
For Consumer/Business Cards for all Latin American Clients, please e-mail the completed form and application to distribution list: "Special Services NY"

Section 1: Line of Business: (select one)

- J.P. Morgan Private Bank J.P. Morgan Private Wealth Management Chase Private Client
- J.P. Morgan Securities J.P. Morgan Law Firm Program

Section 2: Type of Inquiry (check one from each section below)

- A) Domestic International
- B) Consumer Business
- C) New Application Reconsideration Credit Limit Increase (Account # * 4246315170608101-redacted)
Credit Limit Requested: \$ \$150,000

Section 3: Banker Information: (complete all fields)

Today's Date: 03/28/2013
 Requestor: Janet E. Young E-Mail Address: pb-service1318
 Phone Number: 800-834-4343 Standard ID: [REDACTED]

Section 4: Applicant Information: (complete all relevant fields)

ECI: _____ CAS ID: _____
 Name of Applicant: _____
 Authorizing Officer: Jeffrey Epstein
 Business Name: LSJ, LLC
 Social Security Number or ITIN: _____ Tax Identification Number (TIN): [REDACTED]

USA Patriot Act (USAP) If no Social Security Number or ITIN, Chase Card Services is required to collect the following information:

* **Identification Type** (i.e. Passport, Alien Identification Card, or other approved Government Issued Photo ID): _____
 * **Identification Number:** _____
 * **Country Issued By:** _____ * **Issued Date:** _____ * **Expiration Date:** _____

Applicant's/Company's physical address (if different on the application): _____
 Present Employer: _____
 Occupation / Position: _____
 Time with Present Employer: _____ yrs. _____ months

*Gross Annual Income: \$ _____ Business Income: \$

**Alimony, child support, or separate maintenance need not be included if you do not wish to rely on it. Gross Annual Income is income that you are able to use for repaying your debts. Examples may include income earned from salaries, investments, rental properties, Social Security benefits and retirement accounts.

Net Worth (Excluding Primary Residence): \$ _____ Investable Assets: \$ _____

Section 5: Depository/Investment Relationship Information: (provide as much information as possible -- use additional sheets if needed)

Account Number	Type	Balance	Open Date

* Indicates Required Field