



This application can only be used if:

“QUICKCREDIT”

- Business in existence a minimum of 2 years
- Amount of credit card will be \$10,000 or less
- Card guarantor has “strong” personal credit (FICO score of 700 or higher)

**FIRST COMMUNITY CREDIT UNION**  
17151 Chesterfield Airport Rd., Chesterfield, MO 63005

**VISA Business Credit Card Application**  
(636) 537-4400

**BUSINESS INFORMATION:**

BUSINESS NAME \_\_\_\_\_  
 YOUR NAME/TITLE \_\_\_\_\_  
 BUSINESS ADDRESS \_\_\_\_\_  
 BUSINESS PHONE \_\_\_\_\_

TYPE OF BUSINESS      Sole Proprietorship \_\_\_\_      S Corporation \_\_\_\_      Non-Profit \_\_\_\_  
    C Corporation \_\_\_\_      Partnership \_\_\_\_      LLC \_\_\_\_

Federal Tax I.D. Number \_\_\_\_\_      Incorporated in what State? \_\_\_\_\_

**MANAGEMENT INFORMATION:**

At least one owner/officer will be required to personally guarantee this card.

Name(s)/Title	Soc. Sec. #	Address	% Ownership
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**CREDIT CARD REQUEST INFORMATION:**

Credit Limit (\$10,000 limit): \_\_\_\_\_ Purpose: \_\_\_\_\_

Personal guarantor(s):

Names(s)	Current personal annual income	Source
_____	\$ _____	_____
_____	\$ _____	_____

Banking Relationships (include all accounts with First Community Credit Union):

Bank/Credit Union Name	Type of Account	Acct. No.	Balance
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**BUSINESS FINANCIAL INFORMATION:**

How long has your business been established? \_\_\_\_\_

How long has your business been under current management? \_\_\_\_\_

Describe your product or services: \_\_\_\_\_

How many employees do you have? Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Seasonal \_\_\_\_\_

Is your business seasonal? If yes, when? \_\_\_\_\_

List your major customers: \_\_\_\_\_

Is the business a party to, or involved in, any lawsuit, claim or other proceeding? If yes, please explain: \_\_\_\_\_

Has the business or any principal owner ever declared bankruptcy? \_\_\_\_\_

Is the company delinquent on any federal, state, or local tax obligations? \_\_\_\_\_

**CARDHOLDERS:**

Authorization is given to First Community Credit Union to make inquiries to credit bureaus regarding prospective cardholders.

_____	_____	_____	_____	_____
Name	Title	SSN	\$ Limit	Signature
_____	_____	_____	_____	_____
Name	Title	SSN	\$ Limit	Signature
_____	_____	_____	_____	_____
Name	Title	SSN	\$ Limit	Signature
_____	_____	_____	_____	_____
Name	Title	SSN	\$ Limit	Signature

This information and the information provided on all accompanying financial statements and schedules are provided for the purposes of obtaining credit for the applicant and guarantor. Applicant acknowledges that representations made in this statement and accompanying financial statements will be relied upon by the Credit Union in its decision to grant credit and is true and correct in every detail and accurately represents the financial condition of the Applicant on the date given below. By signing below (1) I/we certify that all statements are true and complete and submitted for the purpose of obtaining credit. I/we agree that the usual credit inquiries may be made to verify statements. (2) If this application is accepted and credit card(s) issued, the applicant(s) and any cardholders will be deemed to be in agreement with all terms and conditions contained in the credit card agreement sent upon approval, and any future amendments to said agreement. (3) I/we pledge to you and grant you security interest in all my present and future business loan and share accounts with the credit union to secure my credit card account. I/we authorize you to apply these shareholdings to pay any amounts due on the account or under this agreement if I should default. If this is a secured card: I have also executed a separate security agreement. (4) I/we understand and agree that each cardholder and the Business will be jointly and severally liable for charges to the account. If request is approved, member and any guarantors also agree to provide, at least annually, any financial statements and/or tax returns requested by the Credit Union.

**THIS AGREEMENT CONTAINS A BINDING ARBITRATION PROVISION, WHICH MAY BE ENFORCED BY THE PARTIES.**

Authorized Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
 \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

	Annual Percentage Rate	Credit Range	Annual Fee	Minimum Finance Charge	Transaction Fee for Purchases and Cash Advances	Late Fee (past due 15 days)
VISA Business Platinum	Prime to Prime + 8%*	Up to \$10,000	None	None	None	Lesser of 5% or \$25 (\$1 minimum)

\*-Rate determined by creditworthiness

Mail or Deliver to:  
 First Community Credit Union  
 17151 Chesterfield Airport Road  
 Chesterfield, MO 63005  
 Attn: Business Lending

If you have any questions, or need an extra application, please call (636) 728-3381