

BUSINESS INFORMATION

Business Name _____
 Your Name/Title _____
 Business Address _____
 Business Phone _____ email _____

Type of Business Sole Proprietorship __ S Corporation __ Non-Profit __
 C Corporation __ Partnership __ LLC __

Federal Tax I.D. Number _____ Incorporated in what State? _____

MANAGEMENT INFORMATION

Proprietors, partners, officers, directors owning 20% or more will be required to guarantee this loan.

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

CREDIT CARD REQUEST INFORMATION

Desired Credit Limit _____ Purpose of Funds _____

Describe collateral (if applicable) and estimate of value _____

Personal Guarantors (*Personal guarantees are required for anyone owning 20% or more of the business*)

| Names(s) | % of Ownership | Annual Income |
|----------|----------------|---------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Banking Relationships

| Bank 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? _____

Does the company have a management succession plan? If so, list names of successors. _____

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. _____

What are your selling terms? _____

Are any business assets pledged as collateral? Please list. _____

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? _____

Please list the name of your:

Accountant _____
Attorney _____
Insurance Agent _____

Phone Number _____
Phone Number _____
Phone Number _____

CARDHOLDERS

Aggregate of individual card limits cannot exceed total credit amount requested.

| | | | | |
|-------|-------|-------|----------|-----------|
| _____ | _____ | _____ | _____ | _____ |
| 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 _____

Credit range up to \$15,000. See page three for more information regarding our Visa Business Platinum credit card.

COMPLETED APPLICATIONS MAY BE SUBMITTED BY FAX, EMAIL OR MAIL.

CONTACT US

Phone

636-728-3381

Fax

636-728-3311

Email

businessservices@firstcommunity.com

Hours

Monday-Friday
8 a.m.-4:30 p.m.

Mailing Address

First Community Credit Union
17151 Chesterfield Airport Rd
Chesterfield, MO 63005
Attn: Business Services

Web

www.firstcommunity.com/business

Business Credit Card Application Disclosures



17151 Chesterfield Airport Rd.
Chesterfield, MO 63005
PH: 636-728-3381
TF: 800-767-8880
firstcommunity.com

| INTEREST RATES AND INTEREST CHARGES | |
|--|---|
| Annual Percentage Rate (APR) for Purchases, Balance Transfers and Cash Advances | Prime to Prime + 8%* *Rate determined by creditworthiness. This rate will vary based on the Prime Rate. |
| How to Avoid Paying Interest on Purchases | Your due date is at least 25 days after the close of each billing cycle. We will not charge any interest on the portion of the purchases balance that you pay by the due date each month. |
| FEES | |
| Annual Fee | None |
| Transaction Fees <ul style="list-style-type: none">Foreign Transaction Fee | 1% of the US dollar amount of the foreign transaction <i>This fee applies to any credit card transaction where the merchant country is different from the country of the card issuer, regardless of whether a currency conversion is performed and even if you initiate the transaction from within the United States.</i> |
| Penalty Fees <ul style="list-style-type: none">Late Payment FeeReturned Payment Fee | Up to \$10.00 (\$1.00 minimum) Up to \$10.00 |

These Account Disclosures for your Credit Card are part of and integrated with your Credit Card Agreement with First Community Credit Union. We reserve the right to amend the Credit Card Agreement as permitted by law.