

MEMBER BUSINESS CREDIT CARD APPLICATION

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING THIS CREDIT CARD

Business account must be established with PSFCU and maintained for the duration of the credit card. Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who obtains a loan. When you request a loan, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license, passport or other identifying documents. Before you apply, please note that you must be 18 years of age or older. Credit requests above \$10,000 require the last two years business and personal tax returns, W-2 form(s), schedule(s) K-1, and the last two consecutive pay stubs if applicable. Please contact Business lending for more information.



PRICING INFORMATION: The Interest Rates are variable and may change automatically from time to time according to the variable rate terms set forth in the Business Credit Card Addendum. Index is Prime Rate (WSJ) No Annual Fee for PSFCU business credit card program. For details please see Business Credit Card Addendum.

Interest Rates and Interest Rate Charges For:	Purchase	Cash Advance	Balance Transfer	Penalty Rate
<input type="checkbox"/> Established Business (2 yr. +)	Index Rate + 9.74% APR	Index Rate + 9.74% APR	Index Rate + 9.74% APR	18.00% APR
<input type="checkbox"/> Start-Up and New Business (less than 2 yr.)	Index Rate + 11.74% APR	Index Rate + 11.74% APR	Index Rate + 11.74% APR	18.00% APR

Amount Approved (Credit Union Use Only) \$	Company Number (Credit Union Use Only)
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REQUEST	Amount Requested (\$2,000 minimum)	\$	Business Account Number with PSFCU			
	Please print the Business Name as it should appear on your card.					
	Please print the individual name(s) as it should appear on the card.					
	First Name	Space	Last Name	DOB	Mother's Maiden Name	Individual Credit Line Limit Requested
				/ /		\$ \$
				/ /		\$ \$

BUSINESS INFORMATION	Describe your business					
	Type of Ownership					
	<input type="checkbox"/> Corporation		<input type="checkbox"/> Limited Liability Company		<input type="checkbox"/> Partnership	
	<input type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Nonprofit Organization		<input type="checkbox"/> Limited Partnership	
	<input type="checkbox"/> Other _____					
	Type of Business (Check one)					
	<input type="checkbox"/> Wholesale Trade		<input type="checkbox"/> Retail Trade		<input type="checkbox"/> Service	
	<input type="checkbox"/> Finance/Insurance		<input type="checkbox"/> Construction		<input type="checkbox"/> Real Estate	
	<input type="checkbox"/> Other _____					
	Type of Product or Service: _____					
Legal Name of Business			Business Phone Number ()		Date Business Established (mm/yyyy)	
Business Trade Name or DBA Name			Federal Tax ID Number		State of Organization	
Business Address (Street address required – no P.O. Boxes)			City		State and Zip Code	
Business Billing Address (If different from business address)			City		State and Zip Code	
Business E-Mail Address			Owner(s) Mobile Phone Number ()		Business Fax Number ()	
Years in Business Under Current Owner	Number of Employees	Gross Annual Revenue if Established Business Last Fiscal Year \$		Gross Annual Revenue if Start-Up Current Fiscal Year Projection \$		
Business Bank Accounts at Financial Institution _____ Average Monthly Balance: _____						

DEBT	Business Debt Schedule – Installment Loans, Revolving Line and Credit Cards that are currently outstanding					
	Is the business a Borrower, Co-Borrower or Guarantor on any outstanding credit or any pending credit application?					<input type="checkbox"/> YES <input type="checkbox"/> NO
	Payable to	Current Balance	Credit Limit	Monthly Payment	Type of Debt	Loan Acct. #
	1	\$	\$	\$		
	2	\$	\$	\$		

PERSONAL INFORMATION	Owner / Guarantor / Authorized Officer <input type="checkbox"/> Yes, I am an owner or Authorized Officer of the company <input type="checkbox"/> Yes, I understand that I will be liable, both individually and jointly, with the Business for payment of all balances on any account open pursuant to this Application				
	Owner/ Guarantor / Authorized Officer		Business Ownership %	Social Security Number	Date of Birth mm/dd/yyyy
	Home Address: (Street Address, City, State, Zip)		Email	Cell Phone Number ()	Home Phone Number ()
	Mother's Maiden Name	Monthly Rent or Mortgage Payment: \$	Are you a U.S. citizen or permanent resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "Yes" you may be asked to provide passport or green card document.) Have you and/or Applicant ever filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Personal Annual Income Salary and Wages \$ _____ Other Income \$ _____		Important Notice: Alimony, child support or separate maintenance income need not be disclosed if you do not wish to have it considered. Owner # 2 who is a spouse of Owner # 1 should not report any household income also claimed by Owner # 1			
REQUIRED FOR ALL BUSINESS REQUESTS	The Polish & Slavic Federal Credit Union may not grant business loans to the following individuals or the immediate family member* or associated member* of the following individuals: Chief Executive Officer of the Polish & Slavic Federal Credit Union ,any assistant of the Chief Executive Officer: Chief Lending Officer, Chief Financial Officer, Chief Operating Officer, General Counsel or Vice Presidents.				
	Loans to members of Board of Directors and Supervisory Committee of PSFCU must be approved by the Board of Directors. With regards to the Business Loan Application, the undersigned certifies as follows:			Applicant	
	1) Are you an associated member or an immediate family member of the Chief Executive Officer, Chief Lending Officer, and Chief Financial Officer, Chief Operating Officer, General Counsel or Vice President or any other employee with the corporate title?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
	2) Are you aware of any income received or will be received by the credit union or by the above listed PSFCU senior management employee(s) that is/will be tied to the profit of sale of the business or commercial endeavor for which the loan is made?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
3) Are you Director of the PSFCU?			<input type="checkbox"/> YES <input type="checkbox"/> NO		
4) Are you a member of the PSFCU Supervisory Committee?			<input type="checkbox"/> YES <input type="checkbox"/> NO		
5) Have you signed as (co)borrower, or guarantor on any business credit including a commercial mortgage?			<input type="checkbox"/> YES <input type="checkbox"/> NO		
If yes, please list all credit account number(s) and the borrowing name(s): _____ *Immediate Family Member means a spouse or other family member living in the same household. *Associated Member means any member with a common ownership, investment or other pecuniary interest in a business or commercial endeavor with the borrower or guarantor					
TERMS & CONDITIONS / AGREEMENT / AUTHORIZATION / SIGNATURE	I am obtaining this credit card for business purposes and I agree that I will never use this business credit card for any personal, household or family purposes. By signing below, I certify that I am authorized to submit this application on behalf of the business named above and that all information and documents made in connection with this application, including federal and state income tax returns (if any), are true, correct and complete. I authorize the Polish & Slavic Federal Credit Union ("PSFCU") to obtain balance and payoff information on all accounts requiring payoff as a condition of approving this application and to obtain at any time consumer and business reports from and to report credit information to others, including the Internal Revenue Service and state taxing authorities, about me and my business, both in connection with this application as well as any review, extension or renewal of the credit granted pursuant to this application. I agree to notify PSFCU promptly of any material change in such information, I acknowledge that (i) this application is subject to final approval of the Applicant, its owners, and/or guarantor(s) and that (ii) additional information (i.e. financial statements and/or tax returns) may be required in order for PSFCU to make a final credit decision. A facsimile of my signature, in any capacity, may be used as evidence of the Applicant's acceptance of these agreements. I understand that the use of my Business Credit Card will constitute acknowledgment of receipt and agreement to the terms of the Credit Card Agreement and the disclosures in Business Credit Card Addendum.				
	By signing below, I also, in my individual capacity (even though I may place a title or other designation next to my signature), jointly and severally unconditionally promise to pay to PSFCU all indebtedness of the Applicant at any time arising under or relating to this application and/or Business Credit Card Agreement and other written documentation, as well as any extensions, increases or renewals of that indebtedness. I waive (i) presentment, demand, protest, notice of protest, and notice of non-payment; (ii) any defense arising by reason of any defense of the Applicant or other Owner or Authorizing Officer or Guarantor; and (iii) the right to require PSFCU to proceed against the Applicant, any other Owner, Authorizing Officer or Guarantor, to pursue any remedy in connection with the indebtedness, or to notify me of any additional indebtedness incurred by the Applicant, or of any changes in the Applicant's financial condition. I also authorize PSFCU, without notice or prior consent, to (i) extend, modify, compromise, accelerate, renew, increase or otherwise change the terms of the indebtedness; (ii) proceed against one of more Owners or Authorizing Officers or Guarantors without proceeding against the Applicant or another Owner, Authorized Officer or Guarantor; and (iii) release or substitute any Applicant, Co-Applicant- Owner or Authorizing Officer and/or any Guarantor; I agree (i) I will pay PSFCU's costs and attorney's fees in enforcing this Agreement; (ii) this Agreement is made in New York and will be governed by New York law; and (iii) this Agreement shall benefit PSFCU and its successors and assigns. Upon an event of default and at any time thereafter, Lender may, at its sole discretion, do exercise the right of set-off. This means that Lender may set-off an amount due and payable under the Transaction Documents against any right the Borrower, Owner, Authorized Officer and/ or Guarantor has to receive money from Lender. The Borrower's, Owner's, Authorized Officer's or Guarantor's right to receive money from Lender includes any deposit or share account balances at Lender, any money owed to the Borrower, Owner, Authorized Officer or Guarantor on an item presented to Lender or in its possession for collection or exchange, and any repurchase agreement or other non-deposit obligation. I further agree that use of any feature of the Member Business Credit Card may be used as evidence of the foregoing authorizations, acceptances, and agreements. If approved, the actual credit granted may be less than the preferred amount. If the actual credit granted is less than the preferred amount for my Member Business Credit Card, individual lines will be reduced proportionately.				
Owner / Guarantor / Authorized Officer:		Title:	Date:		
FOR OFFICIAL PSFCU USE ONLY	Applicant's ID number and type	Applicant's ID expiration date	Date:	Employee's Signature:	