



CREDIT APPLICATION

Credit Limit Requested \$ _____

Visa® Business Card

*Denotes mandatory field for verification purposes

Check Account Choice: (Only One)

- ☐ Sole Owner
☐ Partnership
☐ Corporation

Business Power Visa®

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, Federal laws require all financial institutions to obtain, verify and record information that identifies each person who opens an Account. What this means to you: When you open an Account, 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 or other identifying documents.

COMPANY INFORMATION

| | | | | |
|------------------|------|-------|------------------|----------------------------|
| Name of Company* | | | Tax I.D. Number* | |
| Company Address* | City | State | Zip Code | Business Phone* |
| Type of Business | | | | How Many Years In Business |

ISSUE BUSINESS CREDIT CARDS TO THE FOLLOWING INDIVIDUALS: The information gathered for the individuals to receive the credit cards includes the signature at the bottom of each box. No credit report pulled on authorized users. Attach additional sheet if necessary (with signatures)

| | | | | |
|----------------|--|-------------------------------------|--------|-------------------------|
| Last Name | | First | Middle | Social Security Number* |
| Company Title | | Division / Department | | Mother's Maiden Name* |
| Home Address* | | City | State | Zip Code |
| Signature | | Limit for this Individual Card*: \$ | | Date |
| Date Of Birth* | | | | |

| | | | | |
|----------------|--|-------------------------------------|--------|-------------------------|
| Last Name | | First | Middle | Social Security Number* |
| Company Title | | Division / Department | | Mother's Maiden Name* |
| Home Address* | | City | State | Zip Code |
| Signature | | Limit for this Individual Card*: \$ | | Date |
| Date Of Birth* | | | | |

CREDIT INFORMATION

Bank reserves the right to require additional information.

| | | | | |
|---|-------------------------------------|--------------------------------------|-------------------------------|---------------------------------|
| Institution Name and Address | Branch | Loans | Open <input type="checkbox"/> | Closed <input type="checkbox"/> |
| Checking Account Number / Name Listed | | Savings Account Number / Name Listed | | |
| Names and Address of Trade References | Name Under Which Account Is Carried | Account Number | Balance | Monthly Payment |
| 1. | | | \$ | \$ |
| 2. | | | \$ | \$ |
| 3. Institution Credit Card / Institution Name and Address | | | \$ | \$ |

CONDENSED BUSINESS FINANCIAL STATEMENT

| | | | |
|----------------|--|---------------------|---|
| CURRENT ASSETS | \$ | CURRENT LIABILITIES | \$ |
| TOTAL ASSETS | \$ | TOTAL LIABILITIES | \$ |
| IMPORTANT : | THE FINANCIAL STATEMENT OR AN ATTACHED STATEMENT MUST BE COMPLETED BEFORE YOUR APPLICATION CAN BE PROCESSED. | | NET WORTH (Total Assets Less Liabilities) |
| | | | \$ |

SIGNATURE(S)

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: This statement is submitted to obtain credit and I / We certify that all information herein is true and complete. I / We agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of this institution. I / We agree to be bound by the terms and conditions of the bank card agreement, a copy of which will be mailed to the applicant if this application is granted, receipt of such agreement and acceptance of such terms to be conclusively presumed by the applicant's use. If this is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time.

AUTHORIZED OFFICER MUST BE ONE OF THE FOLLOWING (check one) : ____ PRESIDENT / CHAIRMAN ____ V.P. ____ TREASURER ____ OWNER ____ PARTNER

| | |
|---------------------|---------------------|
| X _____ | X _____ |
| Applicant Signature | Applicant Signature |
| Title | Title |
| Date | Date |

Forcht Bank, NA, Lexington, KY 40555-5379
REV 08.2022

All contents are accurate at the time of printing, for changes that may have been made after printing please call 1 (844) 436-7248

| Interest Rates and Different Charges | Business Power Visa® |
|--|--|
| Annual Percentage Rate (APR) for Purchases | 0% Introductory APR for 5 months. After that your APR will be variable 14.50% to 16.50% - Based on creditworthiness; APR will vary with the market based on the Prime Rate* |
| APR for Balance Transfers | 0% Introductory APR for 5 months. After that your APR will be variable 14.50% to 16.50% - Based on creditworthiness; APR will vary with the market based on the Prime Rate* |
| APR for Cash Advances | 14.50% to 16.50% - Based on creditworthiness; APR will vary with the market based on the Prime Rate* |
| Penalty APR and When it Applies | 24.00% - This APR may be applied to your account if you: 1) Make a late payment (60 days late, 1 time); 2) Do any of the above on another account that you have with us. How Long Will the Penalty APR Apply?: If your APRs are increased for any of these reasons, the Penalty APR will apply until you make six consecutive minimum payments when due. |
| How to Avoid Paying Interest | Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on retail purchases and balance transfers if you pay your entire balance by the due date. |
| Minimum Interest Charge | If you are charged interest, the charge will be no less than \$0.50 |
| For Credit Card Tips from the Consumer Financial Protection Bureau | To learn more about factors to consider when applying for or using a credit card, visit the web site of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore . |
| Fees | |
| Annual Fee | \$0.00-\$1.50 per card |
| Transaction Fees | |
| • Balance Transfer | 3.0% of the amount advanced with a minimum of \$5.00 and a maximum of \$40.00 |
| • Cash Advances | 4.0% of the amount advanced with a minimum of \$5.00 and a maximum of \$40.00 |
| • Foreign Transaction | Fees charged by merchant are paid by customer |
| Penalty Fees | |
| • Late Payment | Up to \$25.00 |
| • Over-the-Credit-Limit | None |
| • Returned Payment | Up to \$35.00 |
| • Convenience Check Return | None |
| Other Fees Rush Card Fee - \$35.00 Statement Reprint Fee - \$5.00 On-Demand ACH Fee - \$5.00 | |
| <p>*The Prime Rate used to determine your APR is the rate published in the Wall Street Journal on the last business day of the prior month. Loss of Introductory APR: We may end your introductory APR and apply the Penalty APR if you make a late payment or if you are 60 days late one time on any of your accounts. How We Will Calculate Your Balance: We use a method called "average daily balance" (including new purchases). An explanation of this method is provided in your account agreement. Billing Rights: Information on your rights to dispute transactions and how to exercise those rights is provided in your account agreement. The information about the costs of the cards described above is accurate as of August 2023 and is subject to change. To receive the most up to date information, write us at Forcht Bank, NA, Credit Card division, PO Box 55250, Lexington, KY 40555. OH Residents: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.</p> | |