Business Credit Card Application



CU Teller # for Referral: _

IMPORTANT INFORMATION ABOUT PROCEDURES FOR APPLYING FOR A LOAN

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person or business that opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, if applicable, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Credit Limit Requested:		Anticipated Month	ily Purchase Vol	lume:		
	Applicant/I	ndividual Infori	mation			
Business/Individual Name		Business Tax ID Number (EIN)		Number of Years in Business	State	
DBA Name(s)			Annual Gross Sales/Revenues	Annual Gross Sales/Revenues		
Nature of Business			Number of Employees	Number of Employees		
Contact Name	Title		Primary Contact Number	Primary Contact Number		
Type of Organization: Sole Prop	orietorship Partnership Corporation LLC	Association Non-Pro	ofit Other:			
		Guarantor				
Name		Employer Name		Employer Contact Number	Employer Contact Number	
SSN/TIN Number	Driver's License Number/State	Issuance Date	Expiration Date	Date of Birth		
Primary Contact Number		Secondary Contact Number		Email Address	Email Address	
Physical Address	Mailing Address					
COMPLETE FOR JOINT CREDIT, SECURED O	ID VERIFICATION:		Annual Gross Income			
		Guarantor				
Name	łame		Employer Name			
SSN/TIN Number	Driver's License Number/State	Issuance Date	Expiration Date	Date of Birth		
Primary Contact Number		Secondary Contact Number		Email Address		
Physical Address		Mailing Address				
COMPLETE FOR JOINT CREDIT, SECURED O	ID VERIFICATION:		Annual Gross Income	Annual Gross Income		
☐ Married ☐ Separated ☐ Unmarri	ed (Single - Divorced - Widowed)	Cardholders				
Name				Credit Limit		
ivanic	ess & Contact Number		\$			
				\$		
				\$		
				\$		
				\$		
				\$		

^{**}Individuals who receive cards, if additional cards are needed, please attach spreadsheet.

Return Application to Erie Federal Credit Union (3503 Peach Street, Erie PA 16508). Thank you.

Financial Information The following financial documents should be submitted with this application for requests over \$15,000, for Start-up requests, and requests for Non-Profit Organizations

ITEMS NEEDED TO PROCESS YOUR APPLICATION

- Year-to-Date Income Statement (Profit & Loss) & Balance Sheet
- 2 years Business Financial Statements and/or Tax Returns
- 2 Years Personal Tax Returns of All Owners
- Business Formation Documents including EIN Certificate
- Business Account with Erie Federal Credit Union (for Borrowing Entity)

**IF BUSINESS IS LESS THAN 3 YEARS OLD (START-UP REQUEST)

• Business Plan with Cash Flow Projections Required

**IF BUSINESS IS A NON-PROFIT ORGANIZATION/CORPORATION

• Meeting Minutes on Company Letterhead Approving the Borrowing Request

Note: Additional information may be requested at time of application and/or during an annual review.

State Law Notices

Loan Officer Comments:

Signatures: X

OHIO RESIDENTS ONLY: 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.

WISCONSIN RESIDENTS ONLY: Please sign if you are not applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.



SIGNATURE FOR WISCONSIN RESIDENTS ONLY

DATE

Signatures

You certify that everything you have stated in this application is correct to the best of your knowledge and that the above information is an accurate listing of your financial position. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for anyupdate, increase, renewal, extension or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. You agree that requested documentation that accompanies this application is complete and correct and that it's incorporated as part of this application. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions or state chartered credit unions insured by NCUA. The person(s) signing the application is/are indeed authorized to act on behalf of the borrower.

Borrower and guarantor(s), as appropriate grants to the credit union the authority to use reasonable means to verify application information by requesting credit bureau reports, accessing information about Borrower and guarantor(s), as appropriate from other third party information providers, and other means if applicable. Borrower further grants to credit union the right to share this information with third parties as reasonable in the normal course of doing commercial lending including sharing this information with a third party for purposes of underwriting the loan. Borrower agrees to pay any fees charged by the credit union for processing this application and other related expenses whether the application is approved or denied. You promise that the credit you are applying for is for a business purpose. By signing below or by using your card, you understand that either of those actions will constitute acknowledgment of receipt and agreement to the terms of the credit card agreement and disclosures.

Ву: X			E	Ву: Х			
	GUARANTOR/BORROWER		DATE	GUARANTOR/BORE	ROWER		DATE
Т	TLE:			TITLE:			
By: X			E	By: X			
GUARANTOR/BORROWER			DATE	GUARANTOR/BORROWER			DATE
TITLE:							
			FOR CREDIT UNIC	ON USE ONLY			
Verification	Completion Date		Ву				
Governmen	t List(s) Checked: Treasury Clip	p List OFAC Other:					
List Verificat	ion Complete Date		Ву				
Date	Approved Denied	Approved Signature Limits:	Line of Credit	Credit Card	Other	Other	
	(Adverse Action Notice Sent)	\$	\$	\$	\$	\$	

X

Date