

SMALL BUSINESS CREDIT CARD APPLICATION

Aggregate outstanding credit exposure of borrower or associated borrowers to
Corda Credit Union \$ _____



A. Credit Card Requested

Visa® Platinum 10.90% - 20.90% Variable APR* Visa® Platinum Rewards 13.90% - 23.90% Variable APR* Requested Amount _____
*APR=Annual Percentage Rate. This APR will vary with the market based on the Prime Rate. See page 4 for additional disclosures.

B. Business Member (Applicant)

Complete Legal Name of Business (or individual if sole proprietorship)		DBA Name (if applicable)		Federal Tax ID No.
Business Address: Street	City	State	ZIP Code	Business Phone No.
Mailing Address: Street <small>(If different from business address)</small>	City	State	ZIP Code	Business Fax No.
Date Business Established	Type of Industry	Website URL Address	No. of Employees	
Business Contact Name	Contact Email Address	Contact Phone No.	Current Time as Owner	
Type of Business				
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> S <input type="checkbox"/> C <input type="checkbox"/> Limited Liability Company (LLC) <input type="checkbox"/> Professional Limited Liability Company (PLLC)				
Most Recent Business Income				
Annual Gross _____		Annual Net _____		

C. Business Owners

	Name	Title	Percentage of Ownership
1.			
2.			
3.			
4.			

D. Outstanding Business Obligations

Name of Creditor	Type of Loan (Sec./Unsec./Equip./Lease)	Original Amount	Balance Owed	Monthly Payment	% Interest Rate	Maturity Date

E. Other Business Information (If the answer is YES to any questions below, use the line to explain in further detail)

Is the business liable on any debts not shown above? NO YES _____

Is the business currently involved in any litigation or other legal claims? NO YES _____

Is the business or any owner liable as guarantor or endorser? NO YES _____

Are any taxes past due by the business? NO YES _____

Are any taxes currently past due by the owner? NO YES _____

Has the business ever declared bankruptcy? NO YES _____

Has the owner ever declared personal bankruptcy? NO YES _____

Has any owner or other principal of the business ever been convicted of a felony? NO YES _____

Do you facilitate directly or indirectly any business with the marijuana industry? NO YES _____

Other Business Accounts (Name of other financial institution or third-party account) _____

Business Checking
 Business Savings/Investment
 Business Loan/Line
 Credit Card(s)
 Cash Management
 Merchant
 Payroll Processing

Complete the Business Owner Information section for each owner.

Alimony, child support, and separate maintenance income need not be revealed if you do not wish to have them considered as bases for repaying this obligation.

F. Business Owner 1 Information								
Owner 1 Name:		MI	Last			Suffix		
Residence Address: Street		City			State		ZIP Code	
Date of Birth (MM/DD/YY)		Social Security No.		Home Phone or Cell No.		Personal Email Address		
<input type="checkbox"/> Own <input type="checkbox"/> Rent	No. of Years	Monthly Housing Expense	W2 Income	Other Monthly Income	Other Monthly Income Source <input type="checkbox"/> Rental <input type="checkbox"/> Investments <input type="checkbox"/> Pension <input type="checkbox"/> Other _____			
Is Business considered a primary or secondary source of income? <input type="checkbox"/> Primary <input type="checkbox"/> Secondary								

The personal financial statement information portions (below) are only required if the credit request is \$25,000 and higher.

Assets	Liabilities	Monthly Payments	Interest Rate	Balance Owed
Cash	Real Estate Mortgage (Schedule 2)			
Investments (Schedule 1)	Installment Loans			
Retirement Fund	Credit Card			
Real Estate Owned (Schedule 2)	Student Loans			
Auto(s)	Other Liabilities			
Other Personal Property	TOTAL LIABILITIES			
Other Assets	NET WORTH (Assets minus Liabilities)			
TOTAL ASSETS	TOTAL LIABILITIES PLUS NET WORTH			

Schedule 1	Description	Broker	No. Of Shares or PAR	Total Market Value	Pledged
Investment Stocks and Bonds					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO

Schedule 2	Address	Title in Name Of	Market Value	Mortgage Lender	Balance	Monthly Payment	Rental Income
Real Estate Owned							

Business Owner 2 Information								
Owner 2 Name:		MI	Last			Suffix		
Residence Address: Street		City			State		ZIP Code	
Date of Birth (MM/DD/YY)		Social Security No.		Home Phone or Cell No.		Personal Email Address		
<input type="checkbox"/> Own <input type="checkbox"/> Rent	No. of Years	Monthly Housing Expense	W2 Income	Other Monthly Income	Other Monthly Income Source <input type="checkbox"/> Rental <input type="checkbox"/> Investments <input type="checkbox"/> Pension <input type="checkbox"/> Other _____			
Is Business considered a primary or secondary source of income? <input type="checkbox"/> Primary <input type="checkbox"/> Secondary								

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Real Estate Owned (Schedule 2)	Student Loans			
Auto(s)	Other Liabilities			
Other Personal Property	TOTAL LIABILITIES			
Other Assets	NET WORTH (Assets minus Liabilities)			
TOTAL ASSETS	TOTAL LIABILITIES PLUS NET WORTH			

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Investment Stocks and Bonds					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO

Schedule 2	Address	Title in Name Of	Market Value	Mortgage Lender	Balance	Monthly Payment	Rental Income
Real Estate Owned							

Business Owner 3 Information					
Owner 3 Name:		MI	Last	Suffix	
Residence Address: Street		City	State	ZIP Code	
Date of Birth (MM/DD/YY)		Social Security No.		Home Phone or Cell No.	Personal Email Address
<input type="checkbox"/> Own <input type="checkbox"/> Rent	No. of Years	Monthly Housing Expense	W2 Income	Other Monthly Income	Other Monthly Income Source <input type="checkbox"/> Rental <input type="checkbox"/> Investments <input type="checkbox"/> Pension <input type="checkbox"/> Other _____
Is Business considered a primary or secondary source of income? <input type="checkbox"/> Primary <input type="checkbox"/> Secondary					

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Investments (Schedule 1)		Installment Loans			
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Real Estate Owned (Schedule 2)		Student Loans			
Auto(s)		Other Liabilities			
Other Personal Property		TOTAL LIABILITIES			
Other Assets		NET WORTH (Assets minus Liabilities)			
TOTAL ASSETS		TOTAL LIABILITIES PLUS NET WORTH			

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					<input type="checkbox"/> YES <input type="checkbox"/> NO

Schedule 2	Address	Title in Name Of	Market Value	Mortgage Lender	Balance	Monthly Payment	Rental Income
Real Estate Owned							

Business Owner 4 Information					
Owner 4 Name:		MI	Last	Suffix	
Residence Address: Street		City	State	ZIP Code	
Date of Birth (MM/DD/YY)		Social Security No.		Home Phone or Cell No.	Personal Email Address
<input type="checkbox"/> Own <input type="checkbox"/> Rent	No. of Years	Monthly Housing Expense	W2 Income	Other Monthly Income	Other Monthly Income Source <input type="checkbox"/> Rental <input type="checkbox"/> Investments <input type="checkbox"/> Pension <input type="checkbox"/> Other _____
Is Business considered a primary or secondary source of income? <input type="checkbox"/> Primary <input type="checkbox"/> Secondary					

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Investment Stocks and Bonds					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO

Schedule 2	Address	Title in Name Of	Market Value	Mortgage Lender	Balance	Monthly Payment	Rental Income
Real Estate Owned							

G. Equal Credit Opportunity Notice

The following describes additional protections afforded to you. NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, or age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning this creditor is the Consumer Response Center, Federal Trade Commission, 600 Pennsylvania Ave., NW, Washington, DC 20580

H. Agreement and Disclosures

As used in this application, the words "undersigned" and "owner(s)" refer to the undersigned owner(s) of the business member (individually and collectively). The words "you" and "your" refer to the business member and the guarantors (individually and collectively). The words "us," "we," and "our" refer to Corda Credit Union ("Corda CU"). The representations you make in this application and the information and documents ("supporting information") provided to Corda CU are made with the purpose of obtaining credit for the business member. You acknowledge that Corda CU may rely on your representations in its decision to grant such credit. You certify that your statements are true and correct in every detail and accurately represent your financial condition on the date given below. We are authorized to make all inquiries we deem necessary to verify the accuracy of the information contained herein and determine your creditworthiness. We are further authorized to answer any questions about our experience with you.

By submitting this application, you consent to us obtaining and using consumer credit reports in connection with this application to evaluate your creditworthiness. If this application results in opening a business loan account, you also consent to us obtaining and using consumer credit reports and other information about you for purposes of reviewing or collecting the account. You understand and consent to the use of these reports in decisions to deny account applications, close accounts, and/or restrict the accounts or services. We may check credit and trade references in reviewing the above and disclose information about our credit experience with you, as authorized by law. In addition to the information requested above, we may request additional information from you.

If the request for credit is approved, you agree to maintain a Corda CU share account. The undersigned, being all the individuals having an ownership interest in the applicant, certify that all representations in this application and supporting information are true, correct, and complete, and agree to notify Corda CU promptly of any material change(s); the undersigned also certify that they are duly authorized to apply for the extension of credit on behalf of the applicant and bind the applicant to the terms of the credit.

You acknowledge that you have read and understand this application and supporting information, that you agree to the terms and conditions of the credit being applied for by the applicant, and that you have received and understand any disclosures that accompany this application for credit by the applicant. You further understand and agree that Corda CU may change the terms of, or add new terms to, the agreement governing the extension of credit to the applicant at any time, subject to applicable law, without further notice to you.

I. Personal Guarantee – Individual Owner Agreement and Disclosures

In consideration of the credit extended, if approved, and as a condition for Corda CU to extend such credit, the undersigned personally guarantees the prompt payment when due all present and future liabilities for the credit extended, if approved, to the business member. The undersigned understands and agrees to be individually liable for the debt, fees, finance charges, or other charges incurred by or for the benefit of, or assessed against the business member and for transactions charged to any account of the applicant or debt owed by the business member (collectively, the "obligations"). The undersigned unconditionally agrees to repay any and all obligations according to the terms of the documents governing the extension of credit to the business member. In addition, the undersigned agrees to be jointly and severally liable with the business member and other undersigned owner(s), if any, for any obligations incurred by the business member regardless of the person who may have incurred the obligations, including any authorized users.

Statutory Lien: The business member and the owner(s) acknowledge that Corda CU has the right to enforce a statutory lien against the shares and dividends on deposit in all joint and individual consumer and business accounts, and any monies held by Corda CU now and in the future, owned by the business member or any owner(s), to the extent of any outstanding financial obligation of the business member to Corda CU, as that amount varies from time to time. The business member and the owner(s) acknowledge that Corda CU may enforce the right without further notice to the business member or the owner(s) to satisfy a financial obligation to Corda CU for which the business member was primarily, secondarily, or otherwise responsible, including without limitation as an obligor, maker, co-maker, borrower, co-borrower, guarantor, co-signer, endorser, surety, or accommodation party. The statutory lien does not apply to shares in any individual retirement account (IRA).

Security Interest Specific for Credit Cards. The business member and the owner(s) acknowledge and pledge, specifically as a condition of the use of a credit card issued to the business member, that the business member and owner(s) have voluntarily granted Corda CU a security interest in all joint and individual consumer and business share accounts at Corda CU owned by the business member or any owner(s). If the business credit card loan becomes delinquent, this security interest may be used without further notice to pay all or part of such delinquency. This security interest does not apply to shares in an IRA.

Each Owner Must Initial

Owner 1 _____

Owner 2 _____

Owner 3 _____

Owner 4 _____

Additional Security Interest: The business member and the owner(s) acknowledge and pledge to Corda CU a security interest in all individual and joint consumer or business share accounts at Corda CU owned by the business member or any owner(s), and in the collateral securing loan(s), if any, that the business member has with Corda CU now and in the future, including any type of change or increase, and any proceeds from the sale of such collateral and of insurance thereon, not to exceed the unpaid balance of any loan made to and any charges payable by the business member. The security interest in collateral securing other loans does not apply to any loan(s) on the undersigned's primary residence(s), unless specified to the contrary.

Each Owner Must Initial

Owner 1 _____

Owner 2 _____

Owner 3 _____

Owner 4 _____

Interest Rate and Interest Charges

Variable Annual Percentage Rate (APR) for Purchases, Balance Transfers, and Cash Advances	10.90% - 20.90% Visa® Platinum
	13.90% - 23.90% Visa® Platinum Rewards
Minimum Monthly Payment	Up to 3% of the new balance, but at least \$20 or the new balance if less than \$20
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 you any interest on purchases if you pay your entire balance by the due date each month. We will begin charging interest on Cash Advances or Balance Transfers on the transaction date.
Minimum Interest Charge	If you are charged interest, the charge will be no less than \$1.00
Fees	
Annual Fee	None
Transaction Fees	
Balance Transfer	\$15 or 3% of the amount of each transaction, whichever is greater
Foreign Transaction	1% of transaction in U.S. Dollars
Cash Advance	2% of advance amount; min \$1, max \$5
Penalty Fees	
Late Payment	Up to \$20
Returned Payment	Up to \$20
Other Fees	
Replacement card	\$10

How we calculate your balance: We use a method called "average daily balance (including new purchases)."

J. Signatures (All business owners must sign)

Owner 1 Signature	Print Name	Date (MM/DD/YY)
Owner 2 Signature	Print Name	Date (MM/DD/YY)
Owner 3 Signature	Print Name	Date (MM/DD/YY)
Owner 4 Signature	Print Name	Date (MM/DD/YY)

SMALL BUSINESS CREDIT CARD SERVICING

Use this form to add or remove authorized cardholders, set cardholder spending limits, and to designate card setup for your existing Corda Credit Union account. If you have any questions, please contact a Corda Credit Union representative at **319.892.7300** or **1.800.950.5228** during regular business hours.



- Set up or add authorized cardholders (Complete sections 1, 2, and 5.)
- Remove authorized cardholders (Complete sections 1, 3, and 5.)
- Change spending limits (Complete sections 1, 4, and 5.)

1. Business Information	
Complete Legal Name of Business (or individual if sole proprietorship)	DBA Name (if applicable)
Federal Tax Identification Number (Employer Identification Number [EIN] or Social Security number [SSN])	

2. Adding Authorized Cardholders (all fields are required to be completed for each authorized cardholder)

Number of Credit Cards Requested

Important: If this form accompanies a credit card application, the total credit card limit will be divided equally amongst all cardholders unless you advise us differently after approval of your total credit limit. The combined total spending limits for all cards may not exceed the total approved credit limit for the account.

Authorized Cardholder Name (1)	SSN	Requested Spending Limit (min. limit is \$500.00)	
Street Address	City	State	ZIP Code
Email Address	Date of Birth	Phone Number	
Authorized Cardholder Name (2)	SSN	Requested Spending Limit (min. limit is \$500.00)	
Street Address	City	State	ZIP Code
Email Address	Date of Birth	Phone Number	
Authorized Cardholder Name (3)	SSN	Requested Spending Limit (min. limit is \$500.00)	
Street Address	City	State	ZIP Code
Email Address	Date of Birth	Phone Number	
Authorized Cardholder Name (4)	SSN	Requested Spending Limit (min. limit is \$500.00)	
Street Address	City	State	ZIP Code
Email Address	Date of Birth	Phone Number	

3. Removing Authorized Cardholders

Important: It is the primary account holder's responsibility to reclaim a card issued to an authorized cardholder. Cards must be returned to Corda Credit Union or properly destroyed. To avoid possible losses, contact us promptly for removal requests at 319.892.7300 or 1.800.950.5228 during regular business hours.

Cardholders requested to be removed:

Authorized Cardholder Name (1)	Cardholder Account Number	Removal Effective Date
Authorized Cardholder Name (2)	Cardholder Account Number	Removal Effective Date
Authorized Cardholder Name (3)	Cardholder Account Number	Removal Effective Date
Authorized Cardholder Name (4)	Cardholder Account Number	Removal Effective Date

4. Authorized Cardholder Spending Limit Changes

Important: The desired spending limit will be reset upon receipt of this form and after we have had a reasonable opportunity to act on that notice. If you need to adjust spending limits immediately, contact us at 319.892.7300 or 1.800.950.5228 during regular business hours. The combined total spending limits for all cards may not exceed the total approved credit limit for the account.

Authorized Cardholder Name (1)	Credit Card Number	Requested Spending Limit (min. limit is \$500.00)
Authorized Cardholder Name (2)	Credit Card Number	Requested Spending Limit (min. limit is \$500.00)
Authorized Cardholder Name (3)	Credit Card Number	Requested Spending Limit (min. limit is \$500.00)
Authorized Cardholder Name (4)	Credit Card Number	Requested Spending Limit (min. limit is \$500.00)

See next page for Section 5

5. Acknowledgments and Business Owner / Guarantor Signature(s) (Requires at least one signature.)

Important: This form is considered part of your Business Credit Card application and the Corda Credit Union Business Credit Card Agreement and Disclosures apply. By signing below you are signing for the Business as an acting officer of the Business and individually as a guarantor. You hereby authorize Corda Credit Union to take the actions requested on this form and you agree to the following:

1. You certify that the information contained herein is complete and accurate. You certify that the execution, delivery, and performance of this form have been authorized by the Business.
2. You affirm that you are an acting officer of the Business with the ability to bind the Business to the obligations of the Corda CU Business Credit Card Agreement and Disclosures as it may be amended from time to time (the "Agreement"), which contains the terms and conditions that will govern the Business Account, so that the Business is liable for the total amount of all Purchases, Cash Advances, Balance Transfers, and other transactions charged to the Business Account, plus finance charges, fees, and other charges incurred in connection with the Business Account and all amounts due under the Agreement (the "Obligations").
3. Further, with respect to various sections of this form, you agree to the following:
 - a. Adding Authorized Cardholders: You authorize the issuance of the credit cards to each of the Authorized Cardholder(s) listed above. You agree that the cards will be used for business purposes, and not personal, family or household purposes.
 - b. Removing Authorized Cardholders: You acknowledge that you, the Business, and each guarantor will pay us the total amount of any and all Purchases, Cash Advances, Balance Transfers, and other transactions charged by the above Authorized Cardholder(s) before you notified us to cancel their cards and we have had a reasonable opportunity to act on that notification. Your liability is joint, several and personal. Further, you acknowledge that you have collected the credit card issued to each Authorized Cardholder. You acknowledge that the credit card will be destroyed, rendering it unusable, or returned to Corda Credit Union.
 - c. Authorized Cardholder Spending Limit Changes: If you are requesting a reduction in the spending limit, you acknowledge that you, the Business, and each guarantor will pay us the total amount of any and all Purchases, Cash Advances, Balance Transfers, and other transactions charged by the above Authorized Cardholder(s) whether or not those charges exceed the reduced spending limit.

Important Note: By signing you are signing for the Business as an acting officer of the Business and individually as a guarantor.

Name / Guarantor (1)	Signature	Date
Name / Guarantor (2)	Signature	Date
Name / Guarantor (3)	Signature	Date
Name / Guarantor (4)	Signature	Date