

VISA® BUSINESS CHECK CARD APPLICATION

ZIONS BANK®

WE HAVEN'T FORGOTTEN
WHO KEEPS US IN BUSINESS.®

PROVIDE ALL REQUESTED INFORMATION. INCOMPLETE APPLICATIONS CANNOT BE PROCESSED

COMPANY INFORMATION: (please print)

Business Name (required):			Date: / /		
Street Address:		City:	State:	Zip:	
Mailing Address:		City:	State:	Zip:	
Contact Person:	Phone Number: ()	Tax I.D. Number: -			

Registered as: ☐ Sole Proprietorship ☐ Corporation ☐ General Partnership ☐ Limited Liability Company ☐ Other: _____

Business Checking Account Number:

Accounts NOT eligible: Sweeps, Government, Trusts, MMA, Consumer

Business Name as it should appear on Card: (Maximum 25 spaces)

List below individuals to receive a Visa Business Check Card, (maximum 12). Cardholders will have access to business checking account information.

Cardholder's Name:

Social Security Number:

-

Date of Birth (MM/DD/YYYY):

/ /

Home Address:

Signature:

Social Security Number:

-

Date of Birth (MM/DD/YYYY):

/ /

Home Address:

Signature:

Select a Daily Spending Limit for each cardholder.
Bank at its option may reduce, increase or restrict daily limits.

	ATM	Signature Purchases	Cash Advance	PIN Purchase
1 <input type="checkbox"/>	\$500	\$5,000	\$2,500	\$7,500
2 <input type="checkbox"/>	\$500	\$2,500	\$2,500	\$5,000
3 <input type="checkbox"/>	\$500	\$2,500	\$0	\$2,500
4 <input type="checkbox"/>	\$500	\$500	\$0	\$500
5 <input type="checkbox"/>	\$0	\$5,000	\$2,500	\$7,500
6 <input type="checkbox"/>	\$0	\$5,000	\$0	\$5,000
7 <input type="checkbox"/>	\$0	\$2,500	\$0	\$2,500
8 <input type="checkbox"/>	\$0	\$500	\$0	\$500

PLEASE COMPLETE THE REVERSE SIDE

Date DDA Opened: / /	12 Month Ave. Balance: \$	Satisfactory NSF History: Yes/No/NA	Satisfactory O.D. History: Yes / No / NA	Alerts/Cautions: Yes / No	Other Accounts: Yes / No
		Loans: Yes / No	Satisfactory CheckSystems (New Accounts Only): Yes / No / NA	Signatures Verified: Yes / No	

I have reviewed the application for accuracy and completeness and verified the authority of the signers on reverse side to be authorized to execute, request and receive Visa Business Check Card(s).

Reviewing Supervisor (Print Name):		Title:		Cost Center:
Reviewing Supervisor Signature:		Phone Number: ()	Employee Number:	Date: / /

() DECLINED: Attach copy of letter and retain in file.

() ACCEPTED: Forward application and any supporting documents to: Commercial Card Dept: UT-RDWG-0880



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AGREEMENT

By signing below, you are asking, on behalf of the company identified on this application (the "Company"), for the Bank identified on the reverse, to issue a Visa Business Check Card(s) (the "Card") to individuals listed on this application or attachments. By signing, you represent that you are authorized to sign this application on behalf of the Company and that all of the information provided is true and correct. You also authorize Bank to verify the information you have given and to lawfully receive and exchange credit information about the Company, and its principle owner(s), both now and in the future. You understand and agree that, if this application is approved by Bank, the cardholders listed on this application or any attachments will have access to the Company's business checking account (the "Account") solely by use of the Card(s) or PIN number; Bank shall not be required to pay checks and other items drawn on the Account signed by an Authorized User unless such Authorized User has also signed the signature card for the Account. You agree that the Company will be liable for all fees and charges to the Company's Business Checking Accounts described in the Visa Business Check Card Agreement ("Agreement"), as amended from time to time, and which is incorporated herein and made a part hereof by this reference. By signing and using the Card(s), you agree that all Cards will be used solely for business purposes and that you agree to all of the terms of the Visa Business Check Card Agreement, including the provision on binding arbitration without a judge or jury. By signing below, you acknowledge and agree that you are granting us a Uniform Commercial Code security interest in the Account and any other deposits or accounts you maintain with us to secure payments initiated with the Card(s) and any current or future indebtedness to us whether under this Agreement or any other indebtedness to us.

SOLE PROPRIETORSHIP

Print Owner's Name:

Signature:

Date: / /

OFFICERS' CERTIFICATE (Corporation)

The undersigned is the duly appointed _____, of _____ Corporation (the "Company"). The undersigned attests that the following Resolution was adopted by the Board of Directors of the Company on (Date) _____, at a duly held meeting or otherwise in accordance with applicable state law and has not been revoked or amended.

CORPORATE RESOLUTIONS

RESOLVED, that the person or persons executing this Visa Business Check Card Application (the "Application") are current officers of the Company and are hereby authorized to execute the Application and that each of the persons listed in the Application as Authorized Users are current officers or employees of the Company who are authorized in the name of the Company to perform, from time to time, electronic debit transactions from the Company's Business Checking Account (the "Account") identified in the Application, including, but not limited to, point of sale transactions, ATM transactions, deposits, debits, and cash advances.

FURTHER RESOLVED, that the undersigned are authorized and directed to certify to the Bank the adoption of these Resolutions, and the name(s) and title(s) and specimen signature(s) of the present officer(s) or employee(s) of the Company contained in the Application, and from time to time as changes in such personnel are made, to certify immediately such changes to the Bank, and the name(s) and title(s) and specimen signature(s) of the new personnel.

FURTHER RESOLVED, that these Resolutions shall be conclusively deemed to be in addition to and shall not be deemed to revoke, rescind, modify, or otherwise affect, any other resolutions heretofore delivered to the Bank on behalf of the Company.

FURTHER RESOLVED, that any and all actions heretofore taken by an officer(s) of the Company in connection with or relating to the Account be and they are hereby ratified and confirmed as the proper and binding actions of the Company, and the terms of the Application and Agreement are approved and authorized and are binding upon the Company.

Print name(s) of Authorizing Officer(s):

Signature(s) of Authorizing Officers:

Date: / /

1. _____

2. _____

3. _____

PARTNERS', MEMBERS' OR MANAGERS' CERTIFICATE

Re: _____, a _____
(Company Name) (General Partnerships, LLC, LC, LLP, LP, or Unincorporated Association)

CERTIFICATE

WHEREAS, the persons named below constitute all of the general partners, members, or managers of the general partnership, limited liability company, or limited liability partnership (as appropriate), unincorporated association, or have been otherwise designated pursuant to the general partnership's agreement, articles of organization, or the operating agreement as general partners, members, or managers (as appropriate), and have the authority to bind their respective organization and execute documents on their organizations behalf.

WHEREAS, each of the persons listed in the Application as Authorized Users are current general partners, members, managers, or employees who are authorized in the name of the organization to perform, from time to time, electronic debit transactions from the organization's Business Checking Account (the "Account") identified in the Application, including, but not limited to, point of sale transactions, deposits, debits, and cash advances.

RESOLVED, that the undersigned are authorized and directed to certify to the Bank the adoption of this Certificate, and the name(s) and title(s) and specimen signature(s) of the present general partners, members, managers, or employees of the Company contained in the Application, and from time to time as changes in such personnel are made, to certify immediately such changes to the Bank, and the name(s) and title(s) and specimen signature(s) of the new personnel.

FURTHER RESOLVED, that this Certificate shall be conclusively deemed to be in addition to and shall not be deemed to revoke, rescind, modify, or otherwise affect, any other resolutions heretofore or hereafter delivered to the Bank on behalf of the organization.

FURTHER RESOLVED, that any and all actions heretofore taken by a general partner, member, manager, or employee of the organization in connection with or relating to the Account be and they are hereby ratified and confirmed as the proper and binding actions of the organization, and the terms of the Application and Agreement are approved and authorized and are binding upon the organization.

Print name(s) of Authorizing Officer(s):

Signature(s) of Authorizing Officers:

Date: / /

1. _____

2. _____

3. _____

APPLICANTS COMPLETE, SIGN, AND EXECUTE THE APPROPRIATE RESOLUTION:

