



Business Credit Application

Current DCFCU Member: <input type="checkbox"/> Yes <input type="checkbox"/> No		Member Number
Loan Amount(s) Requested: <input type="checkbox"/> Term Loan <input type="checkbox"/> Line of Credit <input type="checkbox"/> Business VISA		
Use of Proceeds	Proposed Collateral	Estimated Collateral Value

Business Information

Legal Form of Ownership: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company/PLLC		
<input type="checkbox"/> Corporation <input type="checkbox"/> Limited partnership <input type="checkbox"/> Association/Organization		
Business Name	Date Established	Number of Employees
Assumed Name/DBA		Annual Sales Revenue
Business Address	City	State Zip
Building/Facilities: <input type="checkbox"/> Owned <input type="checkbox"/> Leased	Estimated Value (if owned)	Monthly Mortgage/Lease: \$
Business Telephone	Business Fax	Web Site / E-mail Address
Taxpayer Identification Number	Primary Contact Name	Primary Contact Tel. Number

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT. To help the government fight the financing of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. **What this means for you:** When you open an account, we may ask for personal information about you, other owners of the business, or any person designated as a signatory upon the account by resolution. The information we request for individuals may include name, address, date of birth, social security number, and other information that will allow us to identify those persons. We may also ask to see a drivers license or other identifying documents.

1 - Owner/Guarantor Information

Name	Title	Annual Compensation	Percent Ownership
Home Address	City	State	Zip
Home Telephone	Mobile Telephone	E-mail Address	
Social Security Number	Drivers License Number	Date of Birth	

2 - Owner/Guarantor Information

Name	Title	Annual Compensation	Percent Ownership
Home Address	City	State	Zip
Home Telephone	Mobile Telephone	E-mail Address	
Social Security Number	Drivers License Number	Date of Birth	

3 - Owner/Guarantor Information

Name	Title	Annual Compensation	Percent Ownership
Home Address	City	State	Zip
Home Telephone	Mobile Telephone	E-mail Address	
Social Security Number	Drivers License Number	Date of Birth	

4 - Owner/Guarantor Information

Name	Title	Annual Compensation	Percent Ownership
Home Address	City	State	Zip
Home Telephone	Mobile Telephone	E-mail Address	
Social Security Number	Drivers License Number	Date of Birth	

Business Deposit Accounts

Financial Institution	Account #	Checking Balance	Savings Balance
Financial Institution	Account #	Checking Balance	Savings Balance
Financial Institution	Account #	Checking Balance	Savings Balance

Existing Business Debt

Financial Institution	Loan Type <input type="checkbox"/> Term <input type="checkbox"/> Line of Credit	Rate	Current Balance	Monthly Payment	Collateral
Financial Institution	Loan Type <input type="checkbox"/> Term <input type="checkbox"/> Line of Credit	Rate	Current Balance	Monthly Payment	Collateral
Financial Institution	Loan Type <input type="checkbox"/> Term <input type="checkbox"/> Line of Credit	Rate	Current Balance	Monthly Payment	Collateral
Financial Institution	Loan Type <input type="checkbox"/> Term <input type="checkbox"/> Line of Credit	Rate	Current Balance	Monthly Payment	Collateral

General Information

Involved in any bankruptcies or insolvency proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	Any outstanding judgments or liens <input type="checkbox"/> Yes <input type="checkbox"/> No	Involved in any pending lawsuits? <input type="checkbox"/> Yes <input type="checkbox"/> No	Any delinquent loans or trade accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No
---	--	---	---

Fair Credit Reporting Act Notice

DOWNRIVER COMMUNITY FEDERAL CREDIT UNION OBTAINS CONSUMER REPORTS* FROM CONSUMER REPORTING AGENCIES TO EVALUATE LOAN APPLICATIONS, TO DETERMINE ELIGIBILITY FOR ADDITIONAL FINANCIAL PRODUCTS AND SERVICES OFFERED BY DOWNRIVER COMMUNITY FEDERAL CREDIT UNION, AND FOR OTHER LEGALLY PERMISSIBLE PURPOSES.

DOWNRIVER COMMUNITY FEDERAL CREDIT UNION MAY SHARE INFORMATION PROVIDED IN ANY CONSUMER REPORT WITH ANY CREDIT UNION PARTICIPATING IN THE INITIAL OR SUBSEQUENT FUNDING OR CONSIDERATION OF FUNDING (EVALUATING CREDIT FOR APPROVAL) OF THIS LOAN.

PLEASE NOTE THAT CONSUMER REPORT INFORMATION DOES NOT INCLUDE INFORMATION RELATING SOLELY TO TRANSACTIONS AND EXPERIENCES BETWEEN YOU AND DOWNRIVER COMMUNITY FEDERAL CREDIT UNION, INCLUDING INFORMATION YOU PROVIDE WITH THIS CREDIT REQUEST.

*A consumer report is any written, oral, or other communication from a consumer reporting agency which bears on an individual's creditworthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used in whole or in part for the purpose of serving as a factor in establishing the consumer's eligibility for: (a) credit or insurance to be used primarily for personal, family, or household purposes; (b) employment purposes; or (c) any other purpose authorized under section 604 of the Fair Credit Reporting Act.

November 2004

Owners/Officers Signatures

Authorization to obtain a consumer credit report. I understand that the above information may be used to obtain a consumer credit report about me. I have read the above Fair Credit Reporting Act Notice and I authorize Downriver Community Federal Credit Union to obtain such a report in connection with Borrower's application or in accordance with the terms of any loan agreement.

I/We certify to the best of my knowledge that the information contained herein is true and correct.

_____ 1 - Owner/Guarantor Signature	_____ Date	_____ 2 - Owner/Guarantor Signature	_____ Date
_____ 3 - Owner/Guarantor Signature	_____ Date	_____ 4 - Owner/Guarantor Signature	_____ Date

For Credit Union Use Only

Credit Request Decision:

☐ Approved

Credit Limit:

VISA Account #

☐ Not Approved, reason(s):

Signature

Date

Business VISA - Authorized User Information

If this application is approved, credit cards will be issued to the following authorized users. Each card will embossed with the Business Name and the name of the authorized user. Each authorized user listed below shall remain authorized to use the Account until written notice to the contrary is received by the credit union.

1 - Authorized User

Name	Title	Telephone	
Mailing Address	City	State	Zip
Signature			

2 - Authorized User

Name	Title	Telephone	
Mailing Address	City	State	Zip
Signature			

3 - Authorized User

Name	Title	Telephone	
Mailing Address	City	State	Zip
Signature			

4 - Authorized User

Name	Title	Telephone	
Mailing Address	City	State	Zip
Signature			

Business VISA - Application & Agreement

All those signing below certify to the best of their knowledge that the above statements are true and accurate. In addition, the individuals signing below submit this application for a Downriver Community Federal Credit Union VISA Business Card Account, and agree that, upon approval by the credit union, the Business named above will comply with the terms and conditions of the Downriver Community Federal Credit Union VISA Business Credit Card Agreement (the "Agreement"), a copy of which I/we acknowledge receiving. The guarantors signing below agree that the Credit Union may report their liability for and the status of the account to credit bureaus and others who may lawfully receive such information, and they authorize the Credit Union to verify or obtain further information as it may deem necessary concerning the entity, including through the use of reports obtained from consumer or commercial reporting agencies. The undersigned further represent that they are authorized by the Business Member to bind it to the terms and conditions of the Agreement, and that the Cards issued pursuant to the Agreement will be used solely for business purposes, including commercial, industrial and professional purposes, and NOT for personal, family or household purposes.

Personal Guaranty. The undersigned Guarantors hereby absolutely and unconditionally guaranty prompt payment when due and at all times thereafter of any and all existing and future indebtedness and liabilities of every nature and kind, including all renewals, extensions and modifications thereof, now or hereafter owing from Borrower to Credit Union under the Terms and Conditions of the Downriver Community Federal Credit Union VISA Business Card Agreement and Disclosures (the "Agreement"). The undersigned Guarantors waive notice of the acceptance of this Guaranty and of all extensions of credit hereunder. The undersigned Guarantors further waive presentment, protest, notice, demand, or action of any nature on any delinquency with respect to the indebtedness, including the right to require the creditor to sue or otherwise enforce payment thereof, or to enforce any other security or other guaranty given therefor. The undersigned Guarantors agree that this guaranty shall remain in force until the Agreement has terminated and all amounts due thereunder shall have been paid in full. The undersigned guarantors agree that the Credit Union may report the undersigned's liability for, and the status of, the Account to credit bureaus and others who may lawfully receive such information, and they authorize the Credit Union to verify or obtain further information as it may deem necessary concerning the identity or credit worthiness of the individuals below, including through the use of reports obtained from consumer reporting agencies.

1 - Owner/Guarantor Signature	Date	2 - Owner/Guarantor Signature	Date
3 - Owner/Guarantor Signature	Date	4 - Owner/Guarantor Signature	Date