## Coastal Federal Credit Union Business Visa Application Please Print



Coastal Federal Credit Union 1000 Saint Albans Drive, Suite 200 PO Box 99167; Raleigh, NC 27624 www.COASTAL24.COM (800) 868-4262

BUSINESS PROFILE												
				\$								
CFCU Account Number					Current Balance in your CFCU Business Checking							
Applicant's Legal Name (un	der which t	ax retu	rns are	filed)								
Please Set Up Account in th	e Business:			] <sub>Legal I</sub>	Nam	e	☐ <sub>Doin</sub>	ng Busir	iess As			
Doing Business Name							ıld Appear	on Card	d			
Type of Business Retail Wholesale Manufacturer Service Other Please Describe:												
Ownership Structure Sole Proprietor CCorporation SCorporation Limited Liability Comp  Limited Liability Part General Part Limited Part												
											<b>=</b> : 0 1	
Business Address (Physical,	No PO Box	es				City				State		Zip Code
Billing Address				City					State		Zip Code	
Business Phone		Federa	al Tax I				Date Business Established Current Owner Sing					ner Since
\$ Gross Annual Revenues	\$ Net Incon	ne	Fis	to cal Year		Owr	ned Building is	Lease		alv Mort	gage/Le	ase Payment
			113	icai icai			Dunung is		IVIOITE	ily iviore	Buge/ Le	use ruyment
GENERAL INFORMATION												
\$ Total Visa Line Requested		Numb	er of C	Cards Re	anes	Yes No sted Is this to increase an existing line?						
OWNER / GUARANTO	ND DDOE		0. 0. 0	20.00 110	- 44.00		10 11110 10			5		
OWNER / GUARANTO	IN PROFIL	<u>LE</u>										
Individual Legal Name (Own	er/Guarantor	One)		Dat	e of	Birth	SSN Drivers License Number					
Physical Home Address				City		State Zip Code			Code Percentage Ownership \$			vnership
Phone	Mobile			\$ Personal Net Worth (excluding			ding bu				<u> </u>	
10000												
Individual Legal Name (Owner/Guarantor Two)			Date of Birth SSN		SSN	N Drivers		License Number				
Physical Home Address				City			State Zip Code		Percentage Ownership			
			\$							\$		
Phone Mobile				Personal Net Worth (excluding			ding bu					
ADDITIONALAUTHORIZEDSIGNERS												
Name 1			Title			SSN						
Address			City		S	State		Zip Code				
Name Titl			Title			S	SSN					
Address				City			State Zip Code			de		
ADDITIONAL CARDS ISSUED TO												
Name				Title				SSN				
Name				Title				SSN				
Hamic				Title				د	JIV			

CFCU BUSINESS CREDIT CARD RATES								
Annual Percentage Rate for Purchases	Annual Percentage Rate for Advances	Grace Period for Repayment of Balances	Method of Computing Balances for Purchases	Annual Fee	Transaction Fee for Advances	Late Payment Fee	Over the Limit Fee	
14.75% Fixed	16.75% Fixed	25 Days	Average Daily Balance	None	\$5 or 3%	\$25.00	None	

If your business Visa Request exceeds a total credit line of \$25,000, CFCU reserves the right to request additional documentation. This documentation, which may be, but not limited to, Business Entity documents, all guarantors/owners information, and/or additional authorized signers/card recipients.

## VISA BUSINESS CARD AGREEMENT

This AGREEMENT made and entered into by and between Coastal Federal Credit Union, P.O. Box 58429, Raleigh, NC 27658-8429 (the "Credit Union"); and, the Borrower

Whereas, Credit Union is a member and licensee of VISA U.S.A., Inc. duly authorize to issue Visa Business Cards (hereinafter called "Business Cards") and to enter into corporate agreements regarding such issuance, and,

Whereas, Credit Union desires to make available to Company Business Cards for issuance to designated employees of Company that are eligible for said cards, and,

Whereas, Company wishes to have Credit Union issue Business Cards to eligible employees designated by it as "Designated Employees."

Now, therefore, in consideration of the foregoing premises and the mutual covenants and obligations contained herein, the parties agree as follows:

- redit Union shall issue Business Cards to Designated Employees with the understanding that each employee may only charge purchases of goods and services and obtain cash advances that are to ro incidental to travel for authorized business Card Issued shall constitute a separat

- Or or incidental to travel for authorized business activities. Use of said cards will constitute an extension or credit to company by clean some hereunder.

  Unless cancelled by Credit Union, each Business Card shall be in force for the term stated thereon. Within 45 days of the scheduled expiration date of a Business Card, Company or Designated Employee shall notify Credit Union if the Business Card should not be renewed. In absence of such notification, Credit Union may renew the Business Card.

  Company and its principals/owners shall be liable for any and all authorized charges and cash advances made with Company's cards and shall pay it together with any finance charges accrued.

  Unauthorized use is any use by an individual other than Designated Employee without the knowledge or consent of Company or the Designated Employee to whom it was issued. If Company or a Designated Employee believes that the Card has been lost or stolen; the Credit Union must be notified at 800-662-1860.

  Credit Union shall establish and advise Company, by separate document, of the limit (the Individual Limit) on the extension of revolving credit under each account, which Individual Limit may be adjusted from time to time in the discretion of Credit Union with the approval of Company. In addition, Credit Union establishes a limit (the Aggregate Limit) on the extension of revolving credit on all of the account.

- Employee believes that the Card has been lost or stolen; the Credit Union must be notified at 800-662-1860.
  Credit Union shall establish and advise Company, by separate document, of the limit (the Individual Limit) on the extension of revolving credit under each account, which Individual Limit may be adjusted from time to time in the discretion of Credit Union with the approval of Company. In addition, Credit Union may adjust the Aggregate Limit from time to time in the discretion of Credit Union with the approval of Company.
  Company shall assume the responsibility of requiring its employees to adhere to the VISA BUSINESS Card Agreement/Disclosure Statement.

  All Business Cards shall remain the property of Credit Union and are not assignable or transferable and may be cancelled by Credit Union at any time for any reason, without notice, except as required by law. Such cancellation shall in no way impair existing obligations to Credit Union. Any and all cards must be surrendered to Credit Union upon lawful command.

  If Company fails to comply with any term or condition of the Agreement or fails to make any payment within grace period when said payment is due, or if Company becomes a subject of bankruptcy or insolvency proceedings, or if it is discovered that any representation made to induce Credit Union to extend credit hereunder was untrue, the full amount owed by Company shall, at Credit Union's option and after notice, if any required by law, become immediately due and payable. Company shall pay all costs arising from any collections of accounts including, without limitation, reasonable attorneys fees and disbursements.

  Company shall have sole responsibility for notifying Credit Union of any cancellation of charging privileges of Designated Employees. Company shall return to the Credit Union the card upon cancellation. Company shall be responsibility for notifying Credit Union of any cancellation. Company shall be responsibility for notifying Credit Union of any cancellation of the Credit Union.

  This agree
- 8.

- 13.

Owner/Authorized Signature	Title	Date	Company Name
Owner/Authorized Signature	Title	Date	Company Name
			, , , ,
Owner/Authorized Signature	Title	Date	Company Name

## **UNCONDITIONAL GUARANTY**

I absolutely and unconditionally guarantee to Coastal Federal Credit Union ("CFCU") the due and punctual payment of all sums, liabilities and obligations of Applicant arising from the credit card account(s) applied for herein, as and when the same shall become due, whether by acceleration or otherwise. This is a guaranty of payment, not of collection. As Guarantor, I waive (i) any requirement that any action be brought against Applicant or any other person or that claim be made against any security or collateral before enforcing this Unconditional Guaranty, (ii) any requirement of acceptance of this Unconditional Guaranty by CFCU, (iii) any rights which I might have under any law which would require CFCU to attempt to recover against Applicant or to realize upon any collateral or security (including, if NC law applies, any rights under the provisions of North Carolina General Statutes §§ 26-7, et seq.); and (iv) any requirement for notice of, or notice of, an extension, amendment or modification of the Visa Business Card Agreement or other applicable credit card agreement. To the extent allowed under applicable law, I agree to pay CFCU's reasonable attorney's fees and other costs in enforcing this Unconditional Guaranty. I hereby waive presentment for payment, demand, notice of acceleration, protest, notice of protest, notice of non-payment, notice of dishonor and all other notices of any kind whatsoever as well as any other requirements of proof or demand. I agree that my liability and obligations hereunder are primary, and that the release of any one or more of any of the Guarantors (whether signing below or otherwise), the granting of indulgences with respect to any of them, or the obtaining release of any other guarantor or the taking or release of any one or more of any of the Guarantors (whether signing below or otherwise), the granting of indulgences with respect to any of them, or the obtaining or release of any other guarantor or the taking or release of any other guarantor or the taking or release of each of the undersigned.

Guarantor	Seal
Guarantor	Seal

## **AUTHORIZATION**

I/We promise that everything I/we have stated in an application included, in or attached to this document is true, complete and correct to the best of my/our knowledge. If there are any important changes I/we will notify If we promise that everything I/we have stated in an application included, in or attached to this document is true, complete and correct to the best of my/our knowledge. If there are any important changes I/we will notify coastal Federal Credit Union (CFCU) in writing immediately. I/We authorize CFCU to make whatever credit inquiries it deems necessary in connection with this credit application, in the review or collection of any credit extended in reliance on this application for credit and any update, renewal or extension of the credit requested. I/We understand that CFCU will rely on the information in the application and your credit report to make its decision. I/We understand that additional documents may be requested by CFCU to determine a final approval on this credit application. All such information, along with this application, shall remain CFCU's property whether or not credit is extended I/We certify that all purchases and cash advances will be used for business purposes and not for personal, family, or household purposes. If so requested, CFCU will tell you the name and address of any credit bureau form 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.

I have read the above statement.		
Owner/Authorized Signature	<b>Title</b>	Date
Owner/Authorized Signature	Title	Date
Owner/Authorized Signature	Title	Date