

**BUSINESS PURPOSE ACCOUNT
SERVICE APPLICATION**

<p>The terms "we," "us," and "our" mean the financial institution identified above.</p>	<p>Applicant (Business) Name and Address:</p> <p>Acct Type: _____ # _____ Acct Type: _____ # _____ Tax ID #: _____ Phone: _____ Fax: _____</p>
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Service Requested: Debit/Check Card ATM Card Number of Cards Requested: _____

Name(s) of Person(s) to issue cards to:	Transaction Limitation(s) Type (e.g., ATM/Point of Sale), Amount, Frequency
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	_____ \$ _____ per _____
	_____ \$ _____ per _____
	_____ \$ _____ per _____
	_____ \$ _____ per _____
	_____ \$ _____ per _____

Additional Terms:

Signatures: By signing below, you, the undersigned, request the described service(s) and agree that all information in this application is accurate. You agree to the terms of the requested service, including fees and charges, and you acknowledge receipt of the following on behalf of yourself and the entity you represent:

- Business Debit Card Agreement _____
- You authorize us to verify your creditworthiness and employment history, as an individual, through any necessary means, including preparation of a credit report by a consumer reporting agency.

<p>X _____ (Date) Name/Title: _____ ID: _____</p>	<p>X _____ (Date) Name/Title: _____ ID: _____</p>
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<p>X _____ Name/Title: _____ ID: _____</p>	<p>X _____ Name/Title: _____ ID: _____</p>
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INSTITUTION USE ONLY	
<input type="checkbox"/> Approved <input type="checkbox"/> Declined (<input type="checkbox"/> Notice given) By _____ Date _____	<input type="checkbox"/> Resolution/Authorization dated _____ Notes: _____