

PO Box 60651, Montclair, CA 91763-1126 Phone: 800-245-0433 Fax: 909-981-7055

### Applicant Information

NEW CORPORATE VISA®

CREDIT LIMIT INCREASE      REQUEST AMOUNT \$ \_\_\_\_\_ ACCOUNT# \_\_\_\_\_

|                        |                |
|------------------------|----------------|
| NAME OF CORPORATION:   | TAX ID NUMBER: |
| CORPORATION OWNER/CEO: | PHONE NUMBER:  |
| CORPORATION OWNER/CEO: | FAX NUMBER:    |
| EMAIL ADDRESS:         | EMAIL ADDRESS: |

### REQUIRED DOCUMENTS FOR APPLICATION

Please submit the documents listed below:

1. Copies of the Corporate Profit & Loss Statement/Business Plan (if available).
2. A Corporate Resolution
3. Letter of authorization for the request to include the following information:
  - a. Number of authorized signers and the number of cards to be issued.
  - b. Facsimile signature of individuals having cards issued to them.
  - c. Individual limits on each card (aggregately not to exceed total account limit).
4. Credit Card Authorized Signer Addendum (attached) — To be completed by each authorized card signer.

### SIGNATURES

Please read the following carefully before signing. This application is submitted to obtain credit, and we certify that all information herein is true and complete. We agree that inquiries may be made to verify information and that credit references or verifications may be given based on inquiries from other parties. The offer is subject to the credit policies of this institution. We agree to be bound by the terms and conditions of the Credit Union card agreement, a copy of which will be mailed to the applicant(s) if this application is granted, receipt of such agreement and the acceptance of such terms to be conclusively presumed by the applicant's use. The undersigned should be jointly and severally liable for any and all credit extended from time to time.

|                       |                                  |      |
|-----------------------|----------------------------------|------|
| OWNER/CEO PRINT NAME: | OWNER/CEO SIGNATURE:<br><b>X</b> | DATE |
| OWNER/CEO PRINT NAME: | OWNER/CEO SIGNATURE:<br><b>X</b> | DATE |

### LIEN ON SHARES

By signing below you understand and agree that if you are in default on this Account, we may impress and enforce a lien on all shares (except IRA accounts) then on deposit with us to repay the unpaid balance of the Account in accordance with the Federal Credit Union Act and our Bylaws.

|                                   |      |
|-----------------------------------|------|
| AUTHORIZED SIGNATURE:<br><b>X</b> | DATE |
| AUTHORIZED SIGNATURE:<br><b>X</b> | DATE |

## Agreement

“You” and “Your” mean each and all of the applicants signing on the reverse.

1. You certify the accuracy of the information given in this application and you will notify the Credit Union in writing immediately if there is any change in your financial condition. It is a violation of Section 1014, Title 18, U.S. Code, to make a false statement of overvalue security for the purpose of influencing the action of any federally insured Credit Union.
2. You authorize the Credit Union to gather whatever credit and employment information it considers appropriate from time to time (you understand that this will assist, for example, in determining your eligibility for renewal of credit and additional extensions of credit). You authorize the Credit Union to give information concerning your credit experience with us to others. You understand and agree that the Credit Union may retain this application and any other information the Credit Union may receive.
3. You agree that by using or authorizing another to use the Account, you will be bound by the terms and conditions of the Interfaith Federal Credit Union Agreement entitled Variable-Rate VISA® Classic and Platinum Credit Card Agreement and Federal Truth-in-Lending Disclosure Statement, (which will be given to you if your application is approved and before the first transaction is made).

### INTEREST RATES AND INTEREST CHARGES

#### APRs for Variable-Rate Classic and Platinum VISA Accounts:

**Annual Percentage Rate (APR) for Purchases, Cash Advances & Balance Transfers**

**8.90% to 18.00%**

Based on your credit worthiness. This APR will vary with the market based on the Prime Rate.

#### APRs for Variable-Rate Secured VISA Accounts:

**Annual Percentage Rate (APR) for Purchases, Cash Advances & Balance Transfers**

**8.90% to 18.00%**

Based on your credit worthiness. This APR will vary with the market based on the Prime Rate.

**How to Avoid Paying Interest on Purchases**

Your due date is at least 25 days after the close of the billing cycle. We will not charge you interest on purchases if you pay your entire balance by the due date each month.

**For Credit Card tips from the Consumer Financial Protection Bureau**

To learn more about factors to consider when applying for a credit card, visit the website of the Consumer Financial Protection Bureau at: <https://www.consumerfinance.gov/learnmore>

#### Fees

**Annual Fee**

**None**

**Transaction Fees**

- Balance Transfer
- Cash Advance
- Foreign Transactions

**None**

**0.8%** in U.S. dollars of each transaction for single currency international transactions. **1.00%** in U.S. dollars of each transaction for multi-currency international transactions.

**Penalty Fees**

- Late Payment
- Returned Payment

Up to **\$25.00** if the Minimum Payment Due is not paid within 5 days of the Payment Due Date.  
Up to **\$25.00**

**How We Will Calculate Your Balance:** We use a method called “Average Daily Balance (Including Current Transactions).”

The information about the costs of the cards described in this application is accurate as of September 1, 2020. This information may have changed after that date. To find out what may have changed, call us at (800) 245-0433. **SECURED CREDIT CARD NOTICE:** If you are issued a secured credit card, the Credit Union will take a security interest in your funds on deposit with the Credit Union.

#### ACKNOWLEDGEMENT OF PLEDGE OF SHARES (VISA SECURED APPLICANTS ONLY)

By signing below, the undersigned, \_\_\_\_\_, hereby pledges to Interfaith Federal Credit Union a security interest in your account number equal to your VISA credit limit to secure your VISA Secured Account. You understand and agree that you must maintain at least this amount in the account referenced above until your entire credit card balance is repaid and your account is closed. You understand this is a condition of your receiving a VISA Secured Card Account. In the event you default on the VISA Secured Credit Card Agreement, these funds will be applied to the amount owing.

**AUTHORIZED SIGNATURE:**

**X**

**DATE**

**AUTHORIZED SIGNATURE:**

**X**

**DATE**

#### FOR INTERNAL USE ONLY

VISA ACCOUNT NO.: \_\_\_\_\_ DATE APPROVED \_\_\_\_\_

CREDIT LIMIT \$ \_\_\_\_\_ APPROVED BY: \_\_\_\_\_