



CREDIT APPLICATION

BILL CODE 31

Visa® Business Card

Check Account Choice: (Only One)

- Sole Owner Corporation
- Partnership Other

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, Federal laws require all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means to you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

INFORMATION ABOUT THE BUSINESS

Legal Name of the Business		Company Name (DBA Name)	
Business Street Address (If mailing address is different, please provide it on second page)			Suite Number
City	State	Zip Code	
Business Phone Number ()	Business Website		
Contact Person	Phone Number ()	E-mail Address	
Federal Tax Identification Number	Number of Years in Business	Annual Business Revenue	

All holders of twenty percent (20%) or more ownership in a company or partnership must complete the information below.

Principal 1 You MUST initial here if you are applying with Principal 2. I intend to apply for joint credit _____				
First Name	Middle Initial	Last Name	Business Title	
Home Street Address				Unit Number
City	State	Zip Code		
Social Security Number	Date of Birth (MM/DD/YYYY)	E-mail Address		
Home Phone Number ()	Work Phone Number ()	Cell Phone Number ()	% of Ownership	Monthly Income*
Principal 2 You MUST initial here if you are applying with Principal 1. I intend to apply for joint credit _____				
First Name	Middle Initial	Last Name	Business Title	
Home Street Address				Unit Number
City	State	Zip Code		
Social Security Number	Date of Birth (MM/DD/YYYY)	E-mail Address		
Home Phone Number ()	Work Phone Number ()	Cell Phone Number ()	% of Ownership	Monthly Income*

*Alimony, child support, or separate maintenance income need not be provided if you do not wish it to be considered as a basis for repaying this obligation

Please read carefully before signing: You, the undersigned, as an individual and Officer of the Business with authority to bind the Business, (a) Request CB&S Bank to open a credit card account in the name of the Business, (b) Represent that all cards issued on the account will only be used for commercial or business purposes, (c) Agree to be jointly and severally liable with the Business for all charges to the account, (d) Certify that all information supplied in or with the Application is accurate and complete, (e) Agree that inquiries may be made to verify information, a credit bureau report may be obtained, and that information regarding the account may be reported to the credit bureau, (f) Request CB&S Bank issue cards as you direct above or as you direct in the future, (g) Authorize CB&S Bank to contact you or the Business at any telephone number included on this Application or any telephone number subsequently provided to CB&S Bank, (h) If you provide your email address, we may use it to contact you about your account and tell you about useful products and services, (i) Authorize any firm or individual from whom the Business has obtained or requested credit to furnish details of that transaction. The Business also agrees to provide financial information upon request, in a form that is acceptable to the bank, (j) Agree to be bound by the Business Card Loan Agreement that will be sent to you/the Business. **You understand and agree that by signing below you will have personally guaranteed any and all credit extended under the account now and in the future.**

 X
Individual

 X
Individual

 X
Principal 1 Signature Title Date

 X
Principal 2 Signature Title Date

CREDIT DISCLOSURES

Annual Percentage Rate for Purchases	15.97%	Grace Period for re-payment of balances for purchases	25 Days*
Annual Percentage Rate for Balance Transfers	15.97%	Method of Computing the Balance for Purchases	Average Daily Balance Including New Purchases*
Annual Percentage Rate for Cash Advances	15.97%	<p>*A finance charge will be imposed on Credit Purchases only if you elect not to pay the entire new balance shown on your monthly statement for the previous billing cycle within 25 days from the closing date of that statement. If you elect not to pay the entire new balance shown on your previous monthly statement within that 25-day period, a finance charge will be imposed on the unpaid average daily balance of such Credit Purchases from the previous statement closing date and on new Credit Purchases from the date of posting to your account during the current billing cycle, and will continue to accrue until the closing date of the billing cycle preceding the date on which the entire new balance is paid in full or until the date of payment if more than 25 days from the closing date. The finance charge for a billing cycle is computed by applying the monthly periodic rate to the average daily balance of Credit Purchases, which is determined by dividing the sum of the daily balances during the billing cycle by the number of days in the cycle. Each daily balance of Credit Purchases is determined by adding to the outstanding unpaid balance of Credit Purchases at the beginning of the billing cycle any new Credit Purchases posted to your account, and subtracting any payments as received or credits as posted to your account, but excluding any unpaid finance charges.</p> <p>A finance charge will be imposed on Cash Advances from the date made or from the first day of the billing cycle in which the Cash Advance is posted to your account, whichever is later, and will continue to accrue on the unpaid average daily balance of such Cash Advances until the date of payment if paid during the same billing cycle, or until the closing date of the billing cycle preceding the date on which the entire new balance is paid in full or until the date of payment if more than 25 days from the closing date. If the new balance shown on your monthly statement for the prior billing cycle is paid in full within 25 days of the closing date of that statement, no finance charges will be imposed during the current billing cycle for Cash Advances posted to your account during previous billing cycles.</p>	
Penalty APR	NONE		
Minimum Finance Charge	NONE		
Annual Fee	NONE		
Balance Transfer Fee	4.0% of the amount transferred, \$5.00 minimum/\$50.00 maximum		
Cash Advance Fee	4.0% of the amount transferred, \$5.00 minimum/\$50.00 maximum		
Foreign Transaction Fee	NONE		
Late Payment Fee	Up to 5.0% of the amount past due, with a maximum of \$35.00		
Over-the-Credit Limit Fee	NONE		
Return Payment Fee	NONE		
Other Fees	NONE		
<p>The information about the costs of the card described above is accurate as of 10-16-22. This information is subject to change. To receive the most up-to-date information, write us at: CB&S Bank, P.O. Box 910, Russellville, Alabama 35653</p>			

LIST OF EMPLOYEES WHO YOU WISH TO RECEIVE CARDS *(Use an additional page if necessary)*

	Name to Appear on Card	Credit Limit	Social Security Number	Date of Birth (MM/DD/YYYY)	Signature
Principal 1					
Principal 2					
Authorized User 1*					
Authorized User 2*					
TOTAL OF CREDIT LINES REQUESTED \$ _____ The Total must include all Balance Transfers.		THIS SECTION WAS COMPLETED BY: SIGNATURE: _____ PRINT NAME: _____ TITLE: _____			

BUSINESS REFERENCES

REFERENCE 1: Company Name/Bank Name	Company/Bank Address
Phone Number ()	Contact Name
REFERENCE 2: Company Name/Bank Name	Company/Bank Address
Phone Number ()	Contact Name

BALANCE TRANSFER

Account Number	Amount of Transfer (Minimum Transfer of \$500): The entire amount of the Balance Transfer will be allocated to Principal 1	Name of Creditor
Payment Street Address	City	State Zip

MAILING ADDRESS (IF DIFFERENT FROM BUSINESS ADDRESS)

Street Address	City	State	Zip
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FOR INTERNAL USE ONLY

Account No.	Date Approved	Credit Line	Approved By	No. Cards	Pro. Code	Referred By
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