## CREDIT APPLICATION Credit Limit Requested \$

## Visa<sup>®</sup> Business Card

## Check Account Choice: (Only One) Sole Owner Partnership Corporation

**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.

COMPANY INFORMATI	ON							
Name of Company							Tax I.D. Number	
Company Address City		State	Zip Code		Business Phone			
Type of Business						How Many Years in Business		
		E FOLLOWING INDIVIDU redit cards includes the signature at		Attach additional sh	neet if ne	ecessary (with signa	tures)	
Last Name	Fir	st	Middle		Social Security Number			
Company Title			Division / Department			Date of Birth		
Home Address	Cit	ÿ	State	Zip		Home Phone		
Signature			Limit for this Individual Card: \$		Date			
Last Name	Fir	st	Middle		Social Security Number			
Company Title			Division / Department		Date of Birth			
Home Address	Cit	y .	State Zip			Home Phone		
Signature			Limit for this Individual Card: \$		Date			
CREDIT INFORMATION				Attach additional sh	neet if ne	ecessary (with signa	itures)	
Institution Name and Address			Branch Loans Open Closed				Closed	
Checking Account Number / Nar	ne Listed		Savings Account Numbe	er / Name Listed				
Name and Address of Trade Refe	erences Nar	me Under Which Account is Carried	1	Account Number		Balance	Monthly Payment	
1.						\$	\$	
2.						\$	\$	
3. Institution Credit Card / Institu	tion Name and Address					\$	\$	
CONDENSED BUSINES	S FINANCIAL STA	TEMENT		Bank reserves the r	-	equire additional inf		
CURRENT ASSETS \$				CURRENT LIABILI	CURRENT LIABILITIES \$			
TOTAL ASSETS \$			TOTAL LIABILITIES			\$		
IMPORTANT THE FI BEFOR	NANCIAL STATEMENT OF	R AN ATTACHED STATEMENT MU AN BE PROCESSED	ST BE COMPLETED	COMPLETED NET WORTH (Total Assets Less Liabilities)			\$	
PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: This statement is submitted to obtain credit and I / We certify that all information herein is true and complete. I / We agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of this institution. I / We agree to be bound by the terms and conditions of the bank card agreement, a copy of which will be mailed to the applicant if this application is granted, receipt of such agreement and acceptance of such terms to be conclusively presumed by the applicant's use. If this is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. AUTHORIZED OFFICER MUST BE ONE OF THE FOLLOWING (check one):  PRESIDENT/CHAIRMANV.PTREASUREROWNERPARTNER X XXXX								
Applicant Signature	Title	Date	Authorizing Signatu	re	Title		Date	
CREDIT DISCLOSURES								
Annual Percentage Rate for Purchases						ast 25 days after the close of will not charge you interest		
Annual Percentage Rate for Balance Transfers		NONE	Paying Interest	on retail purchase your entire baland	on retail purchases and/or cash advances if you our entire balance by the due date. We do not balance transfers*			
Annual Percentage Rate for Cash Advances		22.00%						
Penalty APR		NONE	Method of Comput Balance for Purcha	ses In		Average Daily Balance ncluding New Purchases*		
Minimum Finance Charge		\$1.00	*A finance charge will be imposed on Credit Purchases only if you elect not to pay the e new balance shown on your monthly statement for the previous billing cycle within 25 days the closing date of that statement. If you elect not to pay the entire new balance shown on previous monthly statement within that 25-day period, a finance charge will be imposed o			within 25 days from ince shown on your		
Annual Fee		NONE	unpaid average daily balance of such Credit Purchases from the previous statement closin date and on new Credit Purchases from the date of posting to your account during the curre 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 a 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 dividing the sum of the daily balances during the billing cycle by the number of days in the cycl Each daily balance of Credit Purchases is determined by adding to the outstanding unpa 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 you			s statement closing t during the current cycle preceding the		
Balance Transfer Fee		NONE				ted by applying the ch is determined by		
Cash Advance Fee		Up to \$49.00				outstanding unpaid Credit Purchases		
Foreign Transaction Fee NONE			account, but excluding any unpaid finance charges. 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					

Late Payment Fee	Up to \$39.00	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.			
Over-the-Credit Limit Fee	Up to \$39.00	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.			
Return Payment Fee	Up to \$35.00	**The prime rate used to determine your APR is the rate published in the Wall Street Journal.			
Other Fees	NONE				
The information about the costs of the cards described above is accurate as of May 2019. This information is subject to change. To receive the most up to date information, write us at Elkhorn Valley Bank & Trust, P.O. Box 1007, Norfolk, NE 68702-1007.					

## FOR INTERNAL USE ONLY

ACCOUNT NO. (1)			ACCOUNT NO. (2)			
DATE APPROVED	CREDIT LINE	APPROVED BY	DATE APPROVED	CREDIT LINE	APPROVED BY	
NO. CARDS	PRO. CODE		NO. CARDS	PRO. CODE		

Elkhorn Valley Bank and Trust, Norfolk, NE 68702-1007 FOLD AND SECURE WITH TAPE FOR MAILING All contents are accurate at the time of printing, for changes that may have been made after printing please call (800) 644-0900.