



## Business Check Card Application

### Business Information

#### Section 1 (Required)

Organization Number: \_\_\_\_\_ Tax-ID Number: \_\_\_\_\_

Company Name (will print on check card) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_

*\*By signing the application below you authorize the Credit Union to obtain information concerning your credit standing. Check Card issuance is subject to Credit Union approval.*

**\*Primary User's Signature:** \_\_\_\_\_  
(Owner, Partner, LLC Manager, Corporate Officer)

### Primary User (print name)

#### Section 2 (Only complete if card is needed for owner)

New Card  Replacement Card  Name Change (Request will generate a new card)

Primary User: \_\_\_\_\_ PIN:     \*Limit Code \_\_\_\_\_

### Authorized Users (print name)

#### Section 3 (Only complete if card is needed for authorized users)

New Card  Replacement Card  Name Change (Request will generate a new card)

User Name: \_\_\_\_\_ Social: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

PIN:     \*Limit Code \_\_\_\_\_ User Signature: \_\_\_\_\_

User Name: \_\_\_\_\_ Social: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

PIN:     \*Limit Code \_\_\_\_\_ User Signature: \_\_\_\_\_

User Name: \_\_\_\_\_ Social: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

PIN:     \*Limit Code \_\_\_\_\_ User Signature: \_\_\_\_\_

*\*The Standard Daily Limit for a Business Check Card for Point of Sale transactions is \$10,000 or 15 transactions per card based on the available balance. If requesting a lower limit for certain cardholders, please designate on the Daily Limit Line, otherwise the standard limit will apply. ATM use is limited to three (3) transactions per day not to exceed \$505.00 for all cards combined.*

Limits Available: 1) \$505 2) \$5,000 3) \$10,000 4) \$15,000

#### Credit Union Use Only

Beacon Score: \_\_\_\_\_ Br: \_\_\_\_\_ Teller Initials: \_\_\_\_\_