Platinum Resource Visa for Business Credit Card Application

To apply, you must be a citizen or permanent resident of the United States.

Account #

•	
Desired Credit Amount \$	Proposed Usage

MICHIGAN STATE UNIVERSITY FEDERAL CREDIT UNION Building Dreams Together

3777 West Road, PO Box 1208 East Lansing, MI 48826

Business Services

		\$									one: 517-333-2424 Ext. : 517-664-4865	2365	
	Section 1 - Business I	nformation											
	Name of Business					Legal Name of Business (if different from first box)							
	Business Street Address (physical street address; no PO Box)				Business Billing Address (if different from Business Street Address)								
	City	State	State ZIP			City			State		ZIP		
	Federal Tax ID Number	Years in Busines	Years in Business			Annual Revenue			Annual Net Profit (after expenses inc. sal				
	usiness Phone Number Other Business Debt (Amour			nt)	t) Business Description			-					
	Form of Business (please select one) Sole proprietorship Partnership Unincorporated assn. / Social club Limited liability company (Please provide a copy of your bylaws or operating agreement if av			ilable.)	Line of Business Professional Manufacturing Service Sales			☐ Retail ☐ Construction ☐ Farming/Agriculture ☐ Other					
	The Authorized Officer(s) is pers	onally liable for a	II charges o	on the Ac	count	by any cardholder	r.						
	Section 2 - Authorize	d Officer(s)	Informa	ation									
	Name of Authorized Officer					Number of Years as Authorized Officer	Date	e of Birth		Social S	ecurity Number		
	Relationship to Business (i.e., owner, pr	resident, etc.)		Annual Sa	lary			Additional	Income	(descript	ion and monthly amount	1	
	Home Street Address (physical street address; no PO Box)			City			State			ZIP			
	Housing (choose one) Month ☐ Rent ☐ Own	ly Housing Payment	Email					Home / Mo	bile Pho	one Num	ber		
2.	Name of Authorized Officer					Number of Years as Authorized Officer	Date	of Birth		Social S	ecurity Number		
	Relationship to Business (i.e., owner, pr	resident, etc.)		Annual Sa	lary	1		Additional	Income	(descript	tion and monthly amount)	1	
	Home Street Address (physical street a	ddress; no PO Box)		City				State			ZIP		
	Housing (choose one) Month ☐ Rent ☐ Own	ly Housing Payment	Email					Home / Mo	bile Pho	one Num	ber		
		LOSS	c: .					ı					
	Section 3 - Authorize I am an Authorized Officer of the busin is provided above) with the authority. Conditions on the reverse of this applitude such authorization upon request. I unindividually and jointly liable for payin	ness (and the person value of the bind the business to bind the business to be station. I will provide to the Bus	whose inform to the Terms a the evidence iness and I are	nation and of e	>s	igned individually and	d on b	oehalf of the	Busines	SS	Date	-	
	the Terms and Conditions.	ig charges on the acco	Dunt and agre	ee to	S	igned individually and	d on b	ehalf of the	Busines	SS	Date		
	Section 4 - Additiona	l Cards for E	mploy	ees									
1.	Name of First Additional Cardholder			Soc	ial Secur	rity Number		Date of E	3irth				
	Home Phone Number			Do y		t this employee to ha	ve cas	sh access at	ATMs/fir	nancial ir	nstitutions?		
2.	Name of Second Additional Cardholde	er		Soc	ial Secur	rity Number		Date of E	Birth				
	Home Phone Number				Do you want this employee to have cash access at ATMs/financial institutions? ☐ Yes ☐ No								

Terms & Conditions

By signing and submitting this application, I hereby acknowledge and agree to the following:

Everything I have stated in my application is true and correct. I understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information on a loan/credit card application made to a federal credit union insured by the National Credit Union Administration (NCUA). By using the account or any card, or authorizing their use, I agree to the terms of the MSUFCU Platinum Resource Visa Credit Card Disclosure and Agreement ("Cardmember Agreement") that I will receive with my card(s). The terms of my account, including the APRs, are subject to change. Any such changes will be made in accordance with the Cardmember Agreement. I, as the Authorizing Officer designated herein, and the business:

- a) request that you open an account in the name of the business
- b) request that card(s) be issued on that account as indicated on this application and other applications
- c) understand that you will renew and replace the card(s) until I cancel
- d) agree to be personally liable for all charges to the card account made by all cardholder(s) issued on the account now or in the future (in the case of a nonprofit organization, the Authorized Officer will not be personally liable)
- e) understand and agree that the account balance created by the charges to the card account is secured by shares and deposits in all corporate accounts of the business, as well as Authorized Officer's individual and joint accounts, with the Credit Union now and in the future (Property to secure other loans from the Credit Union in the business will also secure the card account)
- f) agree to be bound by the agreement governing the account
- g) REPRESENT THAT THE CARD(S) WILL BE USED FOR COMMERCIAL OR BUSINESS PURPOSES.

I understand that the account may not be issued to me if this form is altered, or if the information is not complete, accurate, or verifiable. I understand that I must provide all the information requested in the application and certify that such information is accurate. I understand I must be at least 18 years old to apply for the Platinum Resource Visa Credit Card. I authorize you to verify the information on this application and to receive and exchange information about me, including requesting reports from consumer reporting agencies. I authorize you, your affiliates and subsidiaries to contact these sources for information at any time, to use information about me for marketing and administrative purposes, and share such information with each other, unless I direct you not to share with your affiliates and subsidiaries certain credit information (other than transaction or experience information) about me or any additional cardholder(s) by writing to you at: MSU Federal Credit Union, Visa Department, PO Box 1208, East Lansing, MI 48826-1208 (Please include Tax ID Number).

Federal law requires MSUFCU to obtain, verify, and record information that identifies each person and business opening an account, in order to help the government fight the funding of terrorism and money laundering activities. To process the application, MSUFCU must have your name, physical address, Social Security Number, date of birth, and other information that will allow us to verify your identity. Also, MSUFCU must obtain the business' legal name, its street address, and its Taxpayer Identification Number. You understand that MSUFCU may ask for additional identifying documents from you and the business, as well.

By using the card, authorizing its use, or not canceling the account within 30 days of receipt of the card, you and the business agree to the terms of the Platinum Resource Visa Credit Card Agreement, which will be sent with the card.

¹ Alimony, child support, or separate maintenance income need not be revealed if I choose not to have it considered as a basis for repaying this obligation. You are authorized to check my creditors and present and past employer(s), as well as any credit bureaus, at any time in order to obtain information pertinent to my requested loan. I understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information on a loan application made to a federal credit union insured by NCUA.

Platinum Resource Visa Disclosure

Annual Percentage Rate (APR) for purchases (For-Profit Companies)	s	9.90%-15.90%
Other Annual Percentage Rates (APRs)	•	Balance Transfer APR: 9.90%–15.90% Cash Advance APR: 9.90%–15.90% Penalty APR: 18.00% (see explanation below)
Annual fee	•	None
Method of computing the balance for purchases	•	Average daily balance (including new purchases)
Grace period for repayment of the balance for purchases	•	25 days
Minimum finance charge	•	None
Transaction fee for purchases and cash advances	•	International transactions - 1% for ATM transactions 3% for all other transactions calculated after the transaction has been converted to U.S. dollars
Late Payment Fee, Return Convenience Check Fee	•	\$25.00
Cash Advance Fee	•	3% of advance; minimum of \$5.00, maximum of \$50.00

The Penalty APR is applied if your account becomes delinquent 60 days. How Long Will the Penalty APR Apply? The Penalty Annual Percentage Rate will apply until you make six consecutive minimum payments when due. The information about the costs of the card described in this application is accurate as of June 1, 2017. This information may have changed after that date. To find out what may have changed, visit: msufcu.org/business.



