



Business Visa Credit Card Application

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



3777 West Road, PO Box 1208
 East Lansing, MI 48826-1208
Business Services
 Phone: 800-678-4968, ext. 4848
 Fax: 517-664-4865

Account #	Desired credit amount \$	<input type="checkbox"/> Business Cash Back Visa	<input type="checkbox"/> Platinum Resource Visa
Proposed usage			

Section 1 - Business Information

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	ZIP	City	State	ZIP
Federal tax ID number	Years in business	Annual revenue (*Required)	Annual expenses (including owner salaries) (*Required)		
Business phone number	Other business debt (amount)	Business description			
Form of business (please select one) <input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Unincorporated assn. / Social club <input type="checkbox"/> Limited liability company <i>(Please provide a copy of your bylaws or operating agreement if available.)</i>			Line of business <input type="checkbox"/> Professional <input type="checkbox"/> Manufacturing <input type="checkbox"/> Service <input type="checkbox"/> Sales <input type="checkbox"/> Nonprofit corporation <input type="checkbox"/> For-profit corporation <input type="checkbox"/> Other _____ <input type="checkbox"/> Retail <input type="checkbox"/> Construction <input type="checkbox"/> Farming/Agriculture <input type="checkbox"/> Other _____		

The Authorized Officer(s) is personally liable for all charges on the account by any cardholder.

Section 2 - Authorized Officer(s) Information

1. Name of Authorized Officer		Ownership %	Number of years as authorized officer	Date of birth	Social Security number
Relationship to business (i.e., owner, president, etc.)		Annual salary from business		Additional income (description and annual amount) ¹	
Home street address (physical street address; no PO Box)		City		State	ZIP
Housing (choose one) <input type="checkbox"/> Rent <input type="checkbox"/> Own	Monthly housing payment	Email		Home / Mobile phone number	

2. Name of Authorized Officer		Ownership %	Number of years as authorized officer	Date of birth	Social Security number
Relationship to business (i.e., owner, president, etc.)		Annual salary from business		Additional income (description and annual amount) ¹	
Home street address (physical street address; no PO Box)		City		State	ZIP
Housing (choose one) <input type="checkbox"/> Rent <input type="checkbox"/> Own	Monthly housing payment	Email		Home / Mobile phone number	

Section 3 - Authorized Officer(s) Signature

I am an Authorized Officer of the business (and the person whose information is provided above) with the authority to bind the business to the Terms and Conditions on the reverse of this application. I will provide the evidence of such authorization upon request. I understand that the business and I are individually and jointly liable for paying charges on the account and agree to the Terms and Conditions.

Signed individually and on behalf of the business _____ Date _____
 Signed individually and on behalf of the business _____ Date _____

Section 4 - Additional Cards for Employees

1. Name of first additional cardholder		Last four digits of SSN	Date of birth
Contact phone number		Credit limit	Code word
2. Name of second additional cardholder		Last four digits of SSN	Date of birth
Contact phone number		Credit limit	Code word

If additional credit cards are needed, complete Section 4 information on another sheet of paper and submit with this application.

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 Business Visa Credit Card Agreement and Truth-in-Lending Disclosure Statement ("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 Business Cash Back Visa Credit Card or the Platinum Resource Visa Credit Card for business. 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 Business Visa Credit Card Agreement and Truth-in-Lending Disclosure Statement, 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.

Business Cash Back Visa Disclosure

Annual Percentage Rate (APR) for purchases <i>(For-Profit Companies)</i>	11.90% – 17.90%
Other Annual Percentage Rates (APRs)	Balance Transfer APR: 11.90%–17.90% Cash Advance APR: 11.90%–17.90% Penalty APR: 18.00% <i>(see explanation below)</i>
Annual fee	None
Method of computing the balance for purchases	Average daily balance <i>(including new purchases)</i>
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	None
Reward(s)	1.00% cash back on all purchases

Platinum Resource Visa Disclosure

Annual Percentage Rate (APR) for purchases <i>(For-Profit Companies)</i>	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% <i>(see explanation below)</i>
Annual fee	None
Method of computing the balance for purchases	Average daily balance <i>(including new purchases)</i>
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
Reward(s)	Not applicable

Penalty rate applies if your account becomes delinquent 30 days or more, two times during any 12-month period, or if no payment is received within 60 days from its due date, or upon an adverse evaluation of your creditworthiness.

The information about the costs of the card described in this application is accurate as of November 1, 2021. This information may have changed after that date. To find out what may have changed, write to us at PO Box 1208, East Lansing, MI 48826-1208.