

Business Overdraft Protection Application

Ruci	ness	Info	rm	atio	n
DUSI	ness	IIIIO	rina	auo	"

Dusiness iiiioiiiialioii				
Legal Name of Business			Current Account Number	
Business Physical Address (No P.O. Boxes)		Organization Type:	Business Tax ID# or EIN#	
City, State, Zip		Nature of Business/Industry		
Business Phone Number	Business Fax Number	Gross Annual Sales	Number of employees	
Email Address		Purpose		
		Requested Limit Amount: (\$2500+ requires proof of income)	\$	

	Name (First, MI, Last)	ection and must guaranty this credit. Creditor m Home Phone	Percentage of Ownership %
Authorized Party #1	Home Address (No P.O. Boxes)	Date of Birth	Annual Household Income \$
· arty " ·	City, State, Zip	SSN#	
	Name (First, MI, Last)	Home Phone	Percentage of Ownership %
Authorized Party #2	Home Address (No P.O. Boxes)	Date of Birth	Annual Household Income \$
-	City, State, Zip	SSN#	
	Please sign the following statement if you are not applyi st of the marriage or family of the undersigned	ng for this account or loan with your spouse. Th	e credit being applied for, if granted, will be
X Applicant/Authorize	ed Party #1	Applicant/Authorized Party #2	
Spouse's Name		Spouse's Name	

BY SUBMITTING THIS APPLICATION The individuals ("you") signing below acknowledge and agree to all the Terms and Conditions set forth in this application, (front and back) and sent to you upon card issuance. You also certify that you have the authority to make this application for the business listed and all information and documents submitted are verifiable and accurate. You understand that the creditor may ask for additional identifying documents from you and the business to assist with credit decisions and cooperate with the US Patriot Act. You authorize the creditor to obtain your personal credit report and to provide credit information to credit bureaus about you if applicable. When you are in default and after expiration of any legal right to cure your default, the Summit Credit Union has the right to apply your shares, and/or deposits toward what you own

GUARANTY By signing below, each individual jointly, separately and unconditionally guarantees payment of and agrees to pay creditor for all charges and balances on all accounts established with this application. Under this Guaranty, the liability of Guarantor(s) is unlimited and the obligations of Guarantor are continuing, including any future credit limit increases.

X	X
Applicant/Authorized Party #1, As Principal/Owner/Member And Individually as Personal Guarantor	Applicant/Authorized Party #2, As Principal/Owner/Member And Individually as Personal Guarantor

For SCU Use Only
LO: Date: D Reasons: