

BUSINESS

CREDIT CARD APPLICATION

THE RIGHT CARD EVERY TIME

APPLY TODAY!



First National Bank & Trust

Member FDIC



Building a successful financial plan takes the right resources. That's why we work hard to provide you with quality financial products and services, like our convenient, flexible Visa® Credit Card.

Make your new Card your constant traveling companion and you'll always have instant credit at your fingertips. Your new Card is already packed with everything you need to take you anywhere you want to go. From the tiniest boutique to the largest resort, your

Card is your ticket to the best. You'll enjoy more shopping, more fine restaurants and more travel opportunities with your new Card whether you're going across town or around the world.

Cards are accepted around the globe wherever you see the Visa® emblem. So whatever your plans, choose the credit card that gives you all the value and buying power you need to turn your dreams into reality.

APPLY FOR YOURS TODAY!

BUSINESS CARD

DESIGNS JUST FOR YOU



SELECT THE DESIGN OF YOUR CHOICE:

	01 - First National Bank & Trust Downtown Iron Mountain
	02 - Turquoise Blue



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INTEREST RATES AND INTEREST CHARGES	VISA®
Annual Percentage Rate (APR) for Purchases	13.15% - 17.15% When you open your account, based on your credit worthiness. After that, your APR will vary with the market based on the Prime Rate
APR for Balance Transfers	13.15% - 17.15% When you open your account, based on your credit worthiness. After that, your APR will vary with the market based on the Prime Rate
APR for Cash Advances	13.15% - 17.15% When you open your account, based on your credit worthiness. After that, your APR will vary with the market based on the Prime Rate
Penalty APR and When It Applies	None
How to Avoid Paying Interest on Purchases	Your due date is at least 25 days after the close of each billing cycle. We will not charge you any interest on purchases if you pay your entire balance by the due date each month
Minimum Interest Charge	None
For Credit Card Tips from the Consumer Financial Protection Bureau	To learn more about factors to consider when applying for or using a credit card, visit the website of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore

FEE'S	VISA®
Annual Fees	None
Transaction Fees • Balance Transfer • Foreign Transaction • Cash Advances	None 1.00% of each transaction in U.S. dollars \$5.00
Penalty Fees • Late Payment • Over-The-Credit Limit • Return Check Fee	\$27.00 None \$5.00

NOTICE TO MARRIED WISCONSIN APPLICANTS: No provision of any marital property agreement, unilateral statement under Section 766.59 Wis. Stats., or court decree under Section 766.70 Wis. Stats., will adversely affect the rights of the Bank unless the Bank is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened.

CREDIT APPLICATION

Credit Limit Requested \$ _____

The Total must include all Balance Transfers. For credit card lines of \$25,000 or more, additional documentation may be required.

LIST EMPLOYEES WHO YOU WISH TO RECEIVE CARDS

Each employee credit limit can be set to the Total Credit Line Amount. Use additional page if necessary.

Name to Appear on Card	Credit Limit	Social Security Number	Date of Birth (MM/DD/YY)	Signature
Principal 1 _____				
Principal 2 _____				
Authorized User 1* _____				
Authorized User 2* _____				
Authorized User 3* _____				

*Authorized Users are not financially responsible for charges made on the account.

This section was completed by:

Signature _____ Title _____
Print Name _____

RATES: Rates are accurate as of the print date of this disclosure and are subject to change after this date. Contact the bank for current rate information - 877.803.1814

PRINT DATE: 8/17/2023

COMPANY PROFILE				
<small>Note: All applicable sections should be filled out completely to avoid delay in processing your application.</small>	Company Name		TAX ID#	
	Current Address		Phone ()	
	City	State	Zip Code	
	Nature of Business		Misc Instructions	
	Name & Title Person Opening Account (Beneficial Owner 1)		Social Security #	% of Ownership
	Current Address		City	State
Name & Title Beneficial Owner 2		Social Security #	% of Ownership	
		City	State	
Complete the following information for each individual, in any, who, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 25 percent or more of the equity interests of the legal entity listed above. <input type="checkbox"/> Beneficial Owner Not Applicable Beneficial Owner 1 Information: _____ % of ownership Beneficial Owner 2 Information: _____ % of ownership				
BENEFICIAL OWNERSHIP	Individual Name		Date of Birth	
	Address (Residential or Business Street)		Suite/Apartment Number	
	City	State	Zip Code	
			Social Security Number	
REFERENCES	1. Company/Bank Name		Phone ()	
	Company/Bank Address		Contact Name	
	2. Company/Bank Name		Phone ()	
	Company/Bank Address		Contact Name	
	3. Company/Bank Name		Phone ()	
	Company/Bank Address		Contact Name	
SIGNATURES	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. You authorize us to request one or more consumer reports, to check and verify your credit and employment history, and to answer questions others may ask us about our credit experience with you. This offer is subject to the credit policies of this Institution. I/We agree to be bound by the terms and conditions of the cardholder 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 you intend to apply for joint credit, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. We may report information about your account to the credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.			
	Authorized Signer: ___ Pres/Chm ___ VP ___ Treas ___ Owner ___ Partner			
	Print Name as signed below _____			
FOR INTERNAL USE ONLY	Signature of Authorized Signer for the Company _____ Date _____			
	Visa Account No. _____ Date Approved _____ Credit Line _____ Approved By _____			