



# Business Visa® Debit Card Application

**Instructions:** Card(s) may be issued to the business owner(s) only. Fax completed and signed application along with valid state or military issued identification to the VISA Debit area. Debit card requests will be processed in order of receipt and will be delivered to the business address. Your new card and Personal Identification Number (PIN) will be delivered within 7-10 calendar days from date of request.

Name of Business: \_\_\_\_\_

Primary Business Checking Account Number: \_\_\_\_\_

Secondary Business Checking Account Number: \_\_\_\_\_

Business Money Market Account Number: \_\_\_\_\_

### VISA Debit Card #1

(Print) Cardholder's Name: \_\_\_\_\_

### VISA Debit Card #2

(Print) Cardholder's Name: \_\_\_\_\_

### This application is for a

- New Card(s) - First time applying.
- Replacement Card(s) - New card number will be issued unless the old card (cut in half vertically) is returned at time of request.

Original card was:  Lost  Damaged  Stolen: Police Report #: \_\_\_\_\_ City/County: \_\_\_\_\_

By signing below, I/we understand that the use of a MECU Business VISA Debit Card indicates that I/we accept the Terms and Conditions as outlined in the MECU Business Membership and Account Agreement that I/we received at time of account opening.

I/we further understand that all individuals authorized to receive a card will have access to all accounts that are linked to the account number listed above.

\_\_\_\_\_  
Signature of Cardholder #1 Date

\_\_\_\_\_  
Signature of Cardholder #2 Date

\*\*\*\*\* **FOR CREDIT UNION USE ONLY** \*\*\*\*\*

\_\_\_\_\_  
Signature of MECU Employee Accepting and Verifying Application Teller # Branch/Department Date

Fax to: Visa Debit Area, 443-927-3669