

Paguastad Cradit Lipat \$				
Requested Credit Line*\$ Legal Business Name			Number	
Street AddressCity, State & ZIP Code				
Billing Address (If Different)				
City, State & ZIP Code				
Preferred Phone #	Em	ail		
Federal Tax ID #				
Description of Business -SIC				
Non-Profit ? □Yes □No				
Business Structure: □Sole Proprietorship □Pa				
Business Name on Card(s) (Maximum 24 Space	es)			
Does your business owe any taxes for years prior to the current year? □Yes □No Are there any outstanding judgements against the business? □Yes □No Is your business a party to any claim or lawsuit? □Yes □No Have you ever owned or operated a business which declared bankruptcy? □Yes □No				
If you answered yes to any of the above questions, please provide the details as an attachment.				
EMPLOYEE CARDHOLDERS (Use additional sheets if needed)				
*Credit lines listed for Business Owner and Employees must total	,	om ahove		
Card Requested for Business Owner? ☐Yes ☐No	Credit Line: \$	Cash Access?		
Employee Name				
Employee Name	SSN	Business Phone	Credit Line \$	
Employee Name	SSN	Business Phone	Credit Line \$	
RESOLUTION/AUTHORIZATION				
by other means authorized by law. RESOLVED, that any one (1) officer of this entity is authorize Baltimore, Inc. (Credit Union) and any other documents rec Agreement (as defined therein), which Agreement contains associates of this entity and that any other writings execute	quired by the Credit Union the terms and condition	on in connection with the Application, ns regarding the issuance of credit car	and to agree to be bound by the applicable rds to employees, officers, directors, and	
DATED THISDAY OF		_		
SECRETARY/ASSISTANT SECRETARY				
ATTEST				
FOR PARTNERSHIPS AND LIMITED LIABILITY COMPANIES: All partners/members/managers of the Company, a partnership/limited liability company, hereby authorize and direct any one (1) partner/member/manager to sign and submit an Application to the Credit Union and any other documents required by the Credit Union in connection with the Application, and to agree to be bound by the applicable Agreement (as defined therein), which Agreement contains the terms and conditions regarding the issuance of credit cards to partners/members/managers, employees, and associates of this entity and that any other writings executed in connection with the Application or the agreement are hereby ratified, confirmed, and approved.				
DATED THIS DAY OF				
PARTNER/MEMBER/MANAGER			GER	
PARTNER/MEMBER/MANAGER				
BUSINESS AND GUARANTOR SIGNATURES (S				
I/we certify that I/we have read and agree with the term	ns and conditions prov	ided, incorporated by reference he	rein, signed and sealed on the date written below.	
Business Authorized Signature		Title	Date	
Business Authorized Signature				
Guarantor-Owner#1 Signature (Seal)				
Guarantor-Owner#2 Signature (Seal)				
FOR CREDIT UNION USE ONLY				
			VICA Line of Credit Limit &	
□Approved □Rejected □Counter Offer (Specify) Loan Officer Signature			VISA Line of Credit Limit \$ Date	
Reason for Rejection/Counter Offer				
meason for nejection/counter offer				



BUSINESS OWNER (1) PERSONAL INFORMATION

Name	
Current MECU Individual Member	□Yes □No
Individual Member #	
Current Address	
City, State & ZIP Code	
Home Phone #	
Work Phone #	Cell Phone #
Email	
Social Security #	
Length of Time at Current Address	
Monthly Housing Expense	_□Own □Rent
Current Employer Name/Income Source_	
Profession/Job Title	
Dates of Employment	
Gross Monthly Income	
Do you have any outstanding loans with N	IECU □Yes □No
Name	
Current MECU Individual Member	
Individual Member #	
Current Address	
City, State & ZIP Code	
Home Phone #	
Work Phone #	Cell Phone #
Email	
Social Security #	
Length of Time at Current Address	
Monthly Housing Expense	_□Own □Rent
Current Employer Name/Income Source_	
Profession/Job Title	
Dates of Employment	
Gross Monthly Income	
Do vou have any outstanding loans with M	1ECU □Yes □No