

Business Platinum Credit Application



PLEASE PRINT WITH BLACK INK

CREDIT LINE REQUEST – please print clearly

AMOUNT OF CREDIT REQUESTED: \$ _____ INCREASE MY CURRENT CREDIT LIMIT TO: \$ _____

COMPLETE THIS SECTION FOR ALL INDIVIDUAL CARDHOLDERS (I.E. AUTHORIZED USERS).

AUTHORIZED USER #1

FIRST NAME: _____ M.I.: _____
LAST NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
DOB: _____
DRIVERS LICENSE #: _____
SSN: _____
CREDIT LIMIT: \$ _____

AUTHORIZED USER #2

FIRST NAME: _____ M.I.: _____
LAST NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
DOB: _____
DRIVERS LICENSE #: _____
SSN: _____
CREDIT LIMIT: \$ _____

BUSINESS INFORMATION – please print clearly

ACCOUNT NUMBER: _____

BORROWER: _____

DOING BUSINESS AS (TRADE NAME): _____

TAX I.D. NUMBER: _____

BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

WEB ADDRESS: _____ EMAIL ADDRESS: _____

LOCATION ADDRESS 2: _____

CITY: _____ STATE: _____ ZIP: _____

WEB ADDRESS: _____ EMAIL ADDRESS: _____

NAME OF PRECEDING BUSINESS(ES) IF CHANGED WITHIN THE LAST 5 YEARS: _____

LOCATION ADDRESS (NO P.O. BOX NUMBER): _____

CITY: _____ STATE: _____ ZIP: _____

CORP. PHONE #: _____ FAX #: _____ CONTACT NAME: _____

OWNERSHIP TYPE: CORPORATION PARTNERSHIP SOLE PROP. GOVERNMENT LLC NON-PROF/TAX EXEMPT

INDUSTRY/BUSINESS TYPE: MANUFACTURER WHOLESALER RETAIL SERVICE OTHER _____

DATE ESTABLISHED: _____ NUMBER OF EMPLOYEES: _____

DESCRIBE PRODUCT OR SERVICE: _____

GROSS ANNUAL SALES: \$ _____ ANNUAL NET PROFIT: \$ _____ FISCAL YEAR: _____

IS YOUR BUSINESS A FRANCHISE? YES NO AFFILIATE/SUBSIDIARY _____

IF YES, PLEASE PROVIDE A COPY OF THE FRANCHISE AGREEMENT, FRANCHISER'S FTC DISCLOSURE STATEMENT & FRANCHISER'S FINANCIAL STATEMENT.

BUSINESS INDEBTEDNESS – attach additional sheets if necessary

List all leases, guaranties, commitments, contingencies, or any other debts not listed on the financial statement (including operating leases) on a separate sheet of paper.

To Whom Payable	Original Amount	Original Date	Current Balance	Monthly Payment	Interest Rate	Maturity Date	Collateral Pledged

OWNERSHIP/MANAGEMENT INFORMATION – list all principal owners having greater than 20% ownershipFor all officers, proprietors, general partners, owners, and all those individuals **guaranteeing** the loan request, please complete the following:

1.) NAME _____ SSN: _____ BIRTHDATE: _____ % OWNERSHIP: _____

HOME ADDRESS: _____

2.) NAME _____ SSN: _____ BIRTHDATE: _____ % OWNERSHIP: _____

HOME ADDRESS: _____

3.) NAME _____ SSN: _____ BIRTHDATE: _____ % OWNERSHIP: _____

HOME ADDRESS: _____

1.) Have any owners, managers, guarantors, offices presently been charged under indictment, parole, or on probation? YES* NO2.) Have any of the above ever been charged with, or arrested for, any criminal offense other than a minor motor vehicle violation? YES* NO3.) Have any of the above listed ever been convicted of any criminal offense other than a minor motor vehicle violation? YES* NO4.) Has your business, or have any principals of the business, been involved in a bankruptcy or insolvency proceeding? YES* NO5.) Is your business, or are any of the principals of the business, currently involved in any pending judgements, claims, or lawsuits? YES* NO

* If you answered yes to any of the above, please furnish details on a separate sheet.

DISCLOSURES

For the purpose of obtaining the credit described above, and any future credit granted to the undersigned by Altra Federal Credit Union, the undersigned, jointly and severally, represent that the above statements are true and complete, authorize Altra Federal Credit Union or its agents, to verify them and obtain additional information concerning our credit standing and furnish the same to others, to answer any questions about our credit experience and other financial relationships with Altra Federal Credit Union and agree to the provisions of any rules, regulations or agreements of Altra Federal Credit Union governing such credit. This application is Altra Federal Credit Union property. The undersigned understand that it may be a federal crime punishable by fine or imprisonment or both to knowingly make any false statements. Under the provisions of Title 18, United States Code Section 1014.

By signing below, Borrower and I/we certify that information on this application is true and correct. Borrower and I/we request that Altra Federal Credit Union issue a Business Platinum Credit Card to Borrower. Borrower and I/we understand that all information provided on this application must be verifiable and accurate. Both the Borrower and I/we shall be liable individually and jointly for all charges and balances on the account. The account established and cards issued hereunder shall be used for business purposes and shall be governed by the card agreement and regulations provided when the card is issued, as it may be amended from time to time. Borrower and I/we authorize Altra Federal Credit Union to check my/our credit and employment history for any information provided. Borrower and I/we understand that a security interest is a condition for the credit card account, and that Borrower and I/we grant Altra a security interest in all funds, now or hereafter, in the Altra accounts specified on this application (except IRA's) and if Borrower or I/we default under the terms of this agreement, Borrower and I/we authorize Altra to apply such funds to the payment of the credit card indebtedness. Borrower and I/we also understand that collateral securing other debts at Altra also secures this indebtedness, except for my principal dwelling household goods.

AUTHORIZED SIGNERS & GUARANTOR

SIGNATURE: _____ TITLE: _____ DATE: _____

SIGNATURE: _____ TITLE: _____ DATE: _____

SIGNATURE: _____ TITLE: _____ DATE: _____

ALTRA MAY REQUIRE ANY OR ALL OF THE FOLLOWING INFORMATION TO PROCESS YOUR APPLICATION:

- Business Plan
- Business Income Tax Returns for the last three (3) years, if organized as a Corporation or Partnership (complete returns/all schedules)
- Income and Expense projections for at least one year (cash flow or budget analysis)
- Year-to-date Business Financial Statement, if last year-end is greater than 90 days from application date
- Personal Income Tax Returns for the last three (3) years for EACH Borrower/Guarantor of the company (all schedules and W-2's)
- Personal Financial Statement for EACH Borrower/Guarantor

OFFICE USE ONLY

Appl. Rec'd on _____ Initials _____ Other Information _____

CREDIT CARD AUTHORIZED USER AGREEMENT

Here and After _____ (“Borrower”) “An Authorized User” is any person who Borrower authorizes to use this credit card account who is not a party to this agreement. Borrower may authorize Altra to issue a Card(s) to one or more Authorized Users and Borrower agrees to recover and surrender to Altra that Card(s) upon termination of this agreement or at Altra’s request. Borrower agrees that they are , and will continue to be responsible for all debts, fees, charges, costs, and other amounts (collectively “debts”) resulting from any action of any Authorized User, included but not limited to purchases, cash advances, research requests, requests for statement copies, etc. Borrower agrees that they are responsible for any debts incurred through actions of the Authorized User even if those debts are in excess of Borrower’s Credit Line. Borrower’s obligations for new debts incurred by or through the Authorized User do not cease until Altra receives notification from Borrower, in a form that is acceptable to Altra, that said Authorized User is no longer authorized to use this Account and we have had sufficient time to stop him/her from using this Account. Borrower agrees that Altra may accept instructions, with regard to this Account, from Authorized User as if the instructions were coming from Borrower.

This Credit Card Line is secured by security instruments executed and delivered to Altra by Borrower and Guarantors of this debt. All present and future debts from Borrower to Altra, even if this Agreement, each agrees that it will secure debts incurred either individually or with others who may not sign this Agreement. Nothing in this Agreement constitutes a commitment to make additional or future loans or advances. Any such commitment must be in writing.

THIS AGREEMENT MAY NOT BE CONTRADICTED BY EVIDENCE OF ANY ALLEGED ORAL AGREEMENT. ALL PRIOR ORAL DISCUSSIONS ARE MERGED IN THIS AGREEMENT.

DATE: _____

BY: _____
AUTHORIZED USER SIGNATURE **PLEASE PRINT NAME & TITLE**

BY: _____
AUTHORIZED USER SIGNATURE **PLEASE PRINT NAME & TITLE**



Information for Altra Business VISA Platinum Credit Card

This information is accurate as of 4-1-07, subject to change. For current information, call or 800-755-0055. You will receive your complete Altra Business Platinum credit card disclosure with your Altra credit card.

Visa Platinum Annual percentage rate (APR) for purchase & cash advance	9.9%
Other APRs Fixed Rate	Accounts Not in Good Standing: 17.9%*
Variable Rate information	APR may vary, unless otherwise disclosed. We may change your rate on the first day of each calendar quarter. The new rate is determined by adding 4% to an index, which is the weekly average yield on U.S. Treasury securities adjusted to a constant maturity of two years, as made available by the Federal Reserve Board. The maximum rate is 18%.
Grace period for repayment of purchase balance	25 Days**
Method of computing the balance for purchases	Average Daily Balance (including new purchases)
Annual fees	None
Minimum Finance Charge	None
Other Fees	Cash advance, balance transfer, convenience check Transaction fee 3%, (min \$5 / No max.) Foreign Transaction fee: 1% of transaction. Over-the-limit fee: \$35. Convenience Check stop payment fee: \$29. NSF Check Fee: \$29. Late Payment: \$35. Sales draft copy: \$5. Card Replacement: \$5. Statement Copy: \$5. Over-the-counter payment: \$5.

*Accounts are deemed NOT in good standing after failure to make at least the minimum payments on time for two (2) times during any twelve (12) month period. After making six (6) consecutive on-time minimum payments, rate returns to standard APR.

**There is no grace period for repayment of the balance for cash advances.

State laws require the following notices: California Residents: Married applicants may apply for separate credit. New York Residents: May contact the New York State Banking Department at 1-800-518-8866 to obtain a comparative listing of credit card rates, fees and grace periods. Ohio residents: The Ohio law against discrimination requires that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law. Married Wisconsin Residents: No provision of any marital property agreement, unilateral statement, or court order applying to marital property will adversely affect a creditor's interests prior to the time credit is granted, the creditor is furnished with a copy of the agreement, statement or court order, or has actual knowledge of the provision. In addition, you must send us the name and address of your spouse within 15 days to Altra Federal Credit Union, Attn: Credit Card Department, P.O. Box 443, La Crosse, WI 54601, so we can provide your spouse with a disclosure required under state law.

Monthly payment will be applied to your account in the following order: fees and finance charges, cash advances and purchases.

If you are approved for credit, you will receive a full card Disclosure or Agreement. Read it carefully for important information regarding your account. These documents will be binding on you unless you cancel your account prior to using or authorizing the use of your account. We may change the Disclosure or Agreement at any time in accordance with applicable laws and terms.

An Authorized User is any person who you authorize to use this account but who is not a party to this agreement. You agree that you will continue to be responsible for all debts, fees, charges, costs and other amounts resulting from any action of any Authorized User.

By signing and returning your application, it means you understand and agree to the following conditions: You authorize Altra Federal Credit Union (Altra) to verify the information provided and to obtain a current credit bureau report. The line of credit which you will get will depend on Altra's review of this information. You agree to be bound by the terms of the Altra Credit Card Plan Agreement or Disclosure. You understand that a security interest is a condition for the credit card account and grant Altra a security interest in all funds, now or hereafter, in the Credit Union account specified in this credit offer (except any IRAs), and if you default under the terms of this agreement, you authorize Altra to apply such funds to the payment of your credit card indebtedness. You also understand collateral securing other debts at Altra also secures this indebtedness, except for my principle dwelling and household goods. To continue using any account at Altra you must maintain membership in good standing. You have the right to prohibit information contained in your file with any credit reporting agency from being used in connection with any credit transaction that you do not initiate. You may exercise your right to do so by calling the following credit reporting agencies: Trans Union, P.O. Box 97328, Jackson, MS 39288, or call 800-680-7293; Equifax Options, P.O. Box 740123, Atlanta, GA 30371-0123, or call 800-755-3502; TRW Credit Marketing, P.O. Box 919, Allen, TX, 75002, or call 800-353-0809.