

## Business – Application

### IMPORTANT INFORMATION ABOUT PROCEDURES FOR APPLYING FOR A LOAN

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person or business that opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, if applicable, and other information that will allow us to identify you.

We may also ask to see your driver's license or other identifying documents.

Married Applicants may apply for a separate account.

### LOAN REQUEST

Member/Account Number:

Application Type:  New  Renewal/Change  Other: \_\_\_\_\_

Type of Credit:

Individual/Business  Joint (Co-Applicant must individually complete Co-Applicant Information)

Amount requested: \$

Terms/Maturity:

Type:  Line of Credit  Term Loan  Credit Card

Commercial Real Estate  Other: \_\_\_\_\_

Purpose of Loan:

### LOAN SECURITY

Collateral Description:

Value: \_\_\_\_\_ Liens/Security Interest and State Filed:

Subject Property Address (street, city, state, and zip):

### APPLICANT/INDIVIDUAL INFORMATION

BUSINESS/INDIVIDUAL NAME YEAR BUSINESS ESTABLISHED STATE

DBA NAME(S)

PRIOR BUSINESS NAME(S)

CONTACT NAME TITLE TELEPHONE

TYPE OF ORGANIZATION:

INDIVIDUAL  PROPRIETORSHIP  PARTNERSHIP  CORPORATION  LLC  ASSOCIATION  NON-PROFIT  OTHER:

IF INDIVIDUAL, PROVIDE THE FOLLOWING INFORMATION:

EMPLOYER NAME EMPLOYER TELEPHONE NUMBER

SSN/TIN NUMBER DRIVER'S LICENSE NUMBER/STATE ISSUANCE DATE EXPIRATION DATE DATE OF BIRTH

HOME TELEPHONE WORK TELEPHONE CELL PHONE FAX NUMBER WEB SITE ADDRESS/EMAIL

PHYSICAL ADDRESS

MAILING ADDRESS

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: ID VERIFICATION:

MARRIED  SEPARATED  UNMARRIED (Single – Divorced – Widowed)

### GUARANTOR/CO-APPLICANT

1. I AM PROVIDING THE FOLLOWING INFORMATION FOR PURPOSES OF SERVING AS A (CHECK ONE): SSN/TIN NUMBER DATE OF BIRTH

GUARANTOR  CO-APPLICANT

NAME DRIVER'S LICENSE NUMBER/STATE ISSUANCE DATE EXPIRATION DATE

HOME TELEPHONE WORK TELEPHONE CELL PHONE FAX NUMBER WEB SITE ADDRESS/EMAIL

PHYSICAL ADDRESS

MAILING ADDRESS

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: ID VERIFICATION:

MARRIED  SEPARATED  UNMARRIED (Single – Divorced – Widowed)

2. I AM PROVIDING THE FOLLOWING INFORMATION FOR PURPOSES OF SERVING AS A (CHECK ONE): SSN/TIN NUMBER DATE OF BIRTH

GUARANTOR  CO-APPLICANT

NAME DRIVER'S LICENSE NUMBER/STATE ISSUANCE DATE EXPIRATION DATE

HOME TELEPHONE WORK TELEPHONE CELL PHONE FAX NUMBER WEB SITE ADDRESS/EMAIL

PHYSICAL ADDRESS

MAILING ADDRESS

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: ID VERIFICATION:

MARRIED  SEPARATED  UNMARRIED (Single – Divorced – Widowed)

or  CHECK IF ADDITIONAL GUARANTOR/CO-APPLICANT INFORMATION ACCOMPANIES THIS APPLICATION.

**SOURCES OF INCOME**

**Important Notice to Individuals**

**ALIMONY-CHILD SUPPORT:** The inclusion of alimony, separate maintenance, or child support as income is voluntary and need not be revealed if you do not wish to have it considered in evaluating this application.

GROSS ANNUAL INCOME	APPLICANT	GUARANTOR OR CO-APPLICANT #1	GUARANTOR OR CO-APPLICANT #2	TOTAL	SPOUSE (IF APPLICABLE)
NET SALES					
BASE SALARY					
OVERTIME					
BONUS AND/OR COMMISSIONS					
DIVIDENDS/INTEREST					
NET RENTAL INCOME					
ITEMIZED OTHER:					
1.					
2.					
3.					
4.					
5.					
<b>TOTAL ANNUAL INCOME</b>					

**FINANCIAL INFORMATION**

Please include copies of the following checked items as attachments to this application:

- Federal Tax Return For:**
 Balance Sheet for Current Year for:
 Borrower
 Guarantor/Co-Applicant(s)  
 Current Year  Other: \_\_\_\_\_
  Income Statement for Current Year:
 Borrower
 Guarantor/Co-Applicant(s)  
 Borrower  Guarantor/Co-Applicant(s)
  Other: \_\_\_\_\_
 Borrower
 Guarantor/Co-Applicant(s)

**Financial Services Accounts Information:**

- Checking  Loan(s)  
 Borrower  Guarantor/Co-Applicant(s) \_\_\_\_\_ Number Attached
  Borrower
 Guarantor/Co-Applicant(s) \_\_\_\_\_ Number Attached  
 Savings  Other: \_\_\_\_\_  
 Borrower  Guarantor/Co-Applicant(s) \_\_\_\_\_ Number Attached
  Borrower
 Guarantor/Co-Applicant(s) \_\_\_\_\_ Number Attached  
 Check if additional account information accompanies this application.

**STATE LAW NOTICES** **OHIO RESIDENTS ONLY:** The Ohio laws against discrimination require 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.

**WISCONSIN RESIDENTS ONLY:** Please sign if you are **not** applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.

**X**  
SIGNATURE FOR WISCONSIN RESIDENTS ONLY DATE

**CONSENT TO CONTACT**

By executing this Application, you agree we and/or our third-party providers, including debt collectors, agents, representatives, assigns and servicers (collectively, the "Messaging Parties") may contact you by telephone or text message at any telephone number associated with your account, including wireless telephone numbers (i.e. cell phone numbers) which could result in charges to you, in order to service your account or collect any amounts owed to us, excluding any contacts for advertising and telemarketing purposes as prescribed by law. You further agree methods of contact the Messaging Parties may use include utilization of pre-recorded or artificial voice messages, and/or use of an automatic dialing device. You likewise agree that methods of contact may also include use of ringless voicemails, which are telephone calls that are routed directly to your voicemail for the purposes of leaving either live or prerecorded limited content messages. You understand that anyone with access to your telephone may listen to or read the message the Messaging Parties leave or sent you, and you agree that the Messaging Parties shall have no liability for anyone accessing such messages. You may withdraw the consent to be contacted on your wireless telephone number(s) by written notice to us at 1700 Oak Forest Drive, Onalaska, WI 54650, by email to opt-outcontact@altra.org, via phone at 1(800)755-0055 or by any other reasonable means. If you have provided a wireless telephone number(s) on or in connection with any account, you represent and agree you are the wireless subscriber or customary user with respect to the wireless telephone number(s) provided and have the authority to give this consent. You agree that this consent forms part of a bargained for exchange. Furthermore, you agree to notify us of any change to the wireless telephone number(s) which you have provided to us.

**SIGNATURES**

You promise that everything you have stated in this application is correct to the best of your knowledge and that the above information is a complete listing of what you owe. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. You agree that requested documentation that accompanies this application is complete and correct and that it's incorporated as part of this application. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a crime to willfully and deliberately provide incomplete or incorrect information in this application.

The person(s) signing the application is/are indeed authorized to act on behalf of the borrower. Borrower, co-applicant(s), and guarantor(s), as appropriate grants to the credit union the authority to use reasonable means to verify application information by requesting credit bureau reports, accessing information about borrower, co-applicant(s), and guarantor(s), as appropriate from other third party information providers, and other means if applicable. Borrower further grants to credit union the right to share this information with third parties as reasonable in the normal course of doing commercial lending including sharing this information with a third party for purposes of underwriting the loan. Borrower agrees to pay any fees charged by the credit union for processing this application and other related expenses whether the application is approved or denied. You promise that the credit you are applying for is for a business purpose. By signing below or by using your card, you understand that either of those actions will constitute acknowledgment of receipt and agreement to the terms of the credit card agreement and disclosures.

By: **X**  
 BORROWER  CO-APPLICANT  GUARANTOR DATE

TITLE:  
 By: **X**  
 BORROWER  CO-APPLICANT  GUARANTOR DATE  
 TITLE:

By: **X**  
 BORROWER  CO-APPLICANT  GUARANTOR DATE

TITLE:  
 By: **X**  
 BORROWER  CO-APPLICANT  GUARANTOR DATE  
 TITLE:

**FOR CREDIT UNION USE ONLY**

VERIFICATION COMPLETION DATE \_\_\_\_\_ BY \_\_\_\_\_  REFER TO AUTHORIZATION DESIGNATION

GOVERNMENT LIST(S) CHECKED:  TREASURY CIP LIST  OFAC  OTHER:

LIST VERIFICATION COMPLETION DATE \_\_\_\_\_ BY \_\_\_\_\_

DATE	APPROVED	APPROVED LIMITS:	SIGNATURE	LINE OF CREDIT	CREDIT CARD	OTHER	OTHER
	DENIED (Adverse Action Notice Sent)		\$	\$	\$	\$	\$

LOAN OFFICER COMMENTS:

**SIGNATURES:**  
**X** \_\_\_\_\_ **X** \_\_\_\_\_  
 DATE DATE



### BUSINESS CREDIT CARD ADDENDUM

This addendum is incorporated into and becomes part of your LOANLINER® Business Credit Card Agreement. Please keep this attached to your LOANLINER® Business Credit Card Agreement.

CREDIT CARD NAME:

CREDIT LIMIT: \$

#### INTEREST RATE

<b>Purchases:</b> Variable Rate *	% This interest rate will vary with the Prime Rate.
<b>Balance Transfers:</b> Variable Rate*	% This interest rate will vary with the Prime Rate.
<b>Cash Advances:</b> Variable Rate*	% This interest rate will vary with the Prime Rate.

#### VARIABLE RATE\*

Name of Index:	Prime Rate published in <i>The Wall Street Journal</i> "Money Rates" table.
Date the Index is Determined:	On the 15 <sup>th</sup> day of the month prior to the statement closing date.
Effective Date of Index:	On the first day of the billing cycle, monthly.
Current Index Value:	%

Margins (Amount of percentage points by which Index will be increased to determine the Interest Rate):

Purchases:	percentage points
Balance Transfers	percentage points
Cash Advances:	percentage points

**Your Interest Rate is variable and may change automatically from time to time according to the variable rate terms set forth in this Addendum.** The Interest Rate is subject to change on the first day of the billing cycle monthly, to reflect any change in the Index and will be determined by the Prime Rate on the 15<sup>th</sup> day of the month prior to the statement closing date as published in *The Wall Street Journal* "Money Rates" table to which we add a margin. Your Interest Rate will never be less than 9.90% nor greater than 18.00%. Any increase in the Interest Rate will take the form of additional payments shown as Total Minimum Payments on the statement. If the Index is no longer available, the Credit Union will choose a new index which is based upon comparable information.

#### Fees

<b>Transaction Fees</b> - Cash Advance - Foreign Transaction	\$5.00 or 3.00% of the amount of each cash advance, whichever is greater. 1.00% of each transaction in U.S. dollars.
<b>Penalty Fees</b> - Late Payment - Returned Payment	\$35.00 when the minimum payment is not made within one day of the payment due date. \$29.00 each time a payment is returned for any reason.
<b>Other Fees</b> - Document Copy - Statement Copy - Card Replacement - Balance Transfer Stop Payment - Expedited Monthly Payment	\$5.00 per document. \$5.00 per statement. \$5.00 per card. \$35.00 per stop payment. \$10.00 per payment.

**Method for Computing the Balance for Purchases:** Average Daily Balance (Including New Purchases).

**Balance Transfers:** We may permit you to transfer the balance of an account that you owe to another creditor to your account with us. If we approve a balance transfer, finance charges will be calculated and will accrue according to the same method as for cash advances.

**Minimum Payment:** Your monthly payment will be 2.00% of your total new balance, or \$15.00, whichever is greater plus outstanding unpaid fees and charges, all prior unpaid payments and any amount that exceeds your credit limit.





## BUSINESS CREDIT CARD AGREEMENT

This Business Credit Card Agreement ("Agreement") includes this document, any letter, card carrier, card insert, addendums, any other document accompanying this Agreement, any application that you signed or submitted to the Credit Union, and any notification of changes to this Agreement. The words "you" and "your" mean each person, each business or organization ("organization"), and each officer or owner of the organization who agrees to be bound by this Agreement as set forth below. The words we, our, us and "Credit Union" means the Credit Union whose name appears on this Agreement or anyone to whom the Credit Union transfers this Agreement. The word "card" means the Visa® business credit card you receive from the Credit Union and any duplicates, renewals, or substitutions the Credit Union issues to you. The word "account" means the credit card line of credit account the Credit Union approves for you that is subject to this Agreement.

**1. PERSONS BOUND.** By signing, or otherwise authenticating, any business loan application stating your agreement to be bound by this Agreement or by using the card or account we issue to you, or by authorizing an employee to use the card or account we issue to you, you agree to be bound by the terms of this Agreement. If you are an officer or owner obtaining an account for your organization, you agree to the terms of this Agreement in your personal capacity as well as your capacity as an officer or owner authorized to bind the organization to this Agreement.

**2. USING YOUR ACCOUNT.** If you are approved for an account, the Credit Union will establish a line of credit for you. The amount of your credit limit is set forth on the Addendum accompanying this Agreement. You agree that your credit limit is the maximum amount (purchases, cash advances, finance charges, plus "other charges") that you will have outstanding on your account at any time. If you exceed your credit limit, you must pay the amount you are over your limit plus any fees and unpaid finance charges before payments will begin to restore your credit limit. In addition, a fee may be imposed for exceeding your credit limit. You may request an increase in your credit limit only by a method acceptable to the Credit Union. The Credit Union may increase or decrease your credit limit, refuse to make an advance, and/or terminate your account at any time for any reason not prohibited by law. If you are permitted to obtain cash advances on your account, we may from time to time issue convenience checks to you that may be drawn on your account.

**3. STATEMENT OF BUSINESS PURPOSE.** You agree that you have represented to us that you are obtaining your account for business purposes and that all purchases, cash advances, balance transfers, use of any convenience checks issued on your account, and any other use of your account will only be for a business purpose. You agree that you will never use your account for any personal, household, or family purposes.

**4. USING YOUR CARD.** You may use your card to make purchases from merchants and others who accept your card. The Credit Union is not responsible for the refusal of any merchant or financial institution to honor your card. If you wish to pay for goods or services over the Internet, you may be required to provide card number security information before you will be permitted to complete the transaction. In addition, the Credit Union may permit you to obtain cash advances from the Credit Union, from other financial institutions that accept your card, and from some automated teller machines (ATMs). You understand that not all ATMs may accept your card. If the Credit Union authorizes ATM transactions with your card, it will issue you a personal identification number (PIN). To obtain cash advances from an ATM, you must use the PIN that is issued to you for use with your card. You agree that you will not use your card for any transaction that is illegal under applicable federal, state, or local law. Even if you use your card for an illegal transaction, you will be responsible for all amounts and charges incurred in connection with the transaction. If you are permitted to obtain cash advances on your account, you may also use your card to purchase instruments and engage in transactions that we consider the equivalent of cash. Such transactions will be posted to your account as a cash advance and include, but are not limited to, wire transfers, money orders, bets, lottery tickets, and casino gaming chips as applicable. This paragraph shall not be interpreted as permitting or authorizing any transaction that is illegal.

**5. RESPONSIBILITY.** You agree to pay all charges (purchases, cash advances, balance transfers, use of convenience checks, and any other charge) to your account that are made by you or anyone whom you authorize to use your account. You also agree to pay all finance charges and other charges added to your account under the terms of this Agreement or another agreement you made with the Credit Union. If there is more than one person bound to this Agreement, each will be individually and jointly responsible for paying all amounts owed under this Agreement. If you are an organization, **the officer or owner that obtained the account for the organization is also personally obligated for all charges made under the account.** This means that the

Credit Union can require any one of you to individually repay the entire amount owed under this Agreement. In addition, each person bound under this Agreement, as well as any authorized user, may make purchases individually and, if cash advances are permitted for your account, may obtain cash advances individually.

**6. INTEREST RATE.** The Interest Rates applicable to purchases, cash advances, and balance transfers are disclosed on the Addendum that accompanies this Agreement. Any penalty rate that may be imposed is also disclosed on the Addendum. These rates may be either fixed or variable as disclosed in the Addendum accompanying this Agreement. If the rate for your account is fixed, the rate charged on purchases, cash advances, balance transfers, and any penalty rate will not vary from month to month unless we notify you in advance that the rate will change. If the rate for your account is variable, as indicated on the accompanying Addendum, the rate charged on purchases, cash advances, balance transfers and any penalty rate will vary periodically as disclosed in the Addendum accompanying this Agreement. The initial rate on your account for certain types of transactions may be an introductory discounted rate (Introductory Rate) that is lower than the rate that would ordinarily apply for that type of transaction. If an Introductory Rate applies to your account, the rates and the period of time it will be effective is shown on the Addendum accompanying this Agreement. After the Introductory Rate period expires, the Interest Rate will automatically increase to the rates that would ordinarily apply for that type of transaction based on the terms of this Agreement.

**7. FINANCE CHARGE CALCULATION METHOD FOR PURCHASES.** New purchases posted to your Account during a billing cycle will not incur a finance charge for that billing cycle if you had a zero or credit balance at the beginning of that billing cycle or you paid the entire New Balance on the previous cycle's billing statement by the Payment Due Date of that statement; otherwise a finance charge will accrue from the date a purchase is posted to your Account. To avoid an additional finance charge on the balance of purchases, you must pay the entire New Balance on the billing statement by the Payment Due Date of that statement. The finance charge is calculated separately for purchases and cash advances. For purchases, the finance charge is computed by applying the periodic rate to the average daily balance of purchases. To get the average daily balance of purchases, we take the beginning outstanding balance of purchases each day, add any new purchases, and subtract any payments and/or credits. This gives us the daily balance of purchases. Then, we add all the daily balances of purchases for the billing cycle together and divide the total by the number of days in the billing cycle. This gives us the average daily balance of purchases.

**8. FINANCE CHARGE CALCULATION METHOD FOR CASH ADVANCES.** A finance charge begins to accrue on cash advances from the date you get the cash advance or from the first day of the billing cycle in which the cash advance is posted to your account, whichever is later. For cash advances, the finance charge is computed by applying the periodic rate to the average daily balance of cash advances. To get the average daily balance of cash advances, we take the beginning outstanding balance of cash advances each day, add in any new cash advances, and subtract any payments and/or credits that we apply to the cash advance balance. This gives us the daily balance of cash advances. Then, we add all the daily balances of cash advances for the billing cycle together and divide the total by the number of days in the billing cycle. This gives us the average daily balance of cash advances.

**9. OTHER CHARGES.** In addition to the Interest Rate, additional fees may be imposed on your account. The amount and description of these fees are disclosed on the Addendum accompanying this Agreement.

**10. PAYMENTS.** Each month you must pay at least the minimum payment shown on your statement by the date specified on the statement. Your due date is at least 25 days after the close of each billing cycle. All payments must be made in U.S. dollars and if made by a negotiable instrument such as a check or money order, must be in a form acceptable to us and drawn on a U.S. financial institution. You may pay more frequently, pay more than the minimum payment or pay the Total New Balance in full. If you make extra or larger payments, you are still required to make at least the minimum payment each month your account has a balance (other than a credit balance). The minimum payment for your account is shown on the Addendum accompanying this Agreement. In addition to the minimum payment you must also pay, by the date specified on the statement, the amount of any prior minimum payment(s) that you have not made, all outstanding unpaid fees and charges, and any amount you are over your credit limit. The Credit Union also has the right to demand immediate payment of any amount by which you are over your credit limit. Subject to applicable law, your payments may be applied to what you owe to the Credit Union in any manner the Credit Union chooses. We may accept checks marked "payment in full" or with words of similar effect without losing any of our rights to collect the full balance of your account with us.

**11. FOREIGN TRANSACTIONS.** Purchases and cash advances made in foreign currencies will be debited from your account in U.S. dollars. The exchange rate between the transaction currency and the billing currency used for processing international transactions is a rate selected by Visa from a range of rates available in wholesale currency markets for the applicable transaction date, which rate may vary from the rate Visa itself receives, or the rate mandated by the government or governing body in effect for the applicable transaction date. The exchange rate used on the transaction date may differ from the rate that would have been used on the processing date or the cardholder statement posting date.

A fee (finance charge), calculated in U.S. dollars, will be imposed on all foreign transactions, including purchases, cash advances, and credits to your account. A foreign transaction is any transaction that You complete or a merchant completes on your card outside of the United States, with the exception of U.S. military bases, U.S. territories, U.S. embassies, or U.S. consulates. Transactions completed by merchants outside of the United States are considered foreign transactions, regardless of whether You are located inside or outside the United States at the time of the transaction. The Foreign Transaction Fee is set forth on the Addendum accompanying this Agreement.

**12. COLLECTION COSTS.** You agree to pay all costs of collecting the amount you owe under this Agreement, including court costs and reasonable attorneys' fee, as permitted by applicable state law.

**13. SECURITY INTEREST.** If you give the Credit Union a specific pledge of shares by signing a separate pledge of shares, your pledged shares will secure your account. You may not withdraw amounts that have been specifically pledged to secure your account until the Credit Union agrees to release all or part of the pledged amount. In addition, your account is secured by all other shares you have in any individual or joint account with the Credit Union, except for shares in an Individual Retirement Account or in any other account that would lose special tax treatment under state or federal law if given as security. These other shares may be withdrawn unless you are in default under this Agreement. You authorize the Credit Union to apply the balance in your individual or joint share accounts to pay any amounts due on your account if you should default. Collateral securing other loans you have with the Credit Union may also secure this loan, except that a dwelling will never be considered as security for this account, notwithstanding anything to the contrary in any other agreement.

**14. DEFAULT.** You will be in default if you fail to make any minimum payment or other required payment by the date that it is due. You will be in default if you: break any promise you make under this Agreement; exceed your credit limit; are a natural person and you die; are an organization and you cease to exist; are an organization and you change your legal structure so that the person obligating the organization to this Agreement is no longer authorized to bind it to legal agreements; file for bankruptcy or become insolvent; make any false or misleading statements in any credit application or credit update; or if something happens that the Credit Union believes may substantially reduce your ability to repay what you owe. When you are in default, the Credit Union has the right to demand immediate payment of your full account balance without giving you notice. If immediate payment is demanded, you agree to continue paying finance charges at the applicable interest rate until what you owe has been paid, and any shares that were given as security for your account may be applied towards what you owe.

**15. CHANGING OR TERMINATING YOUR ACCOUNT.** The Credit Union may change the terms of this Agreement and any attached Addendum from time to time. Notice of any change will be given in accordance with applicable law. If permitted by law, the change will apply to your existing account balance as well as to future transactions.

Either you or the Credit Union may terminate this Agreement at any time, but termination by you or the Credit Union will not affect your obligation to pay the account balance plus any finance and other charges you owe under this Agreement. You are also responsible for all transactions made to your account after termination, unless the transactions were unauthorized.

The card or cards you receive remain the property of the Credit Union and you must recover and surrender to the Credit Union all cards upon request or upon termination of this Agreement whether by you or the Credit Union. The Credit Union has the right to require you to pay your full account balance at any time after your account is terminated, whether it is terminated by you or the Credit Union.

**16. CHANGING OR TERMINATING AUTHORIZED USERS.** Upon your request, we may issue additional cards for authorized users that you designate. You must notify us in writing of any termination of an authorized user's right to access your account. Your letter must include the name of the authorized user and your account number and/or any subaccount number issued to the authorized user along with the authorized user's card and any convenience or other access checks issued to the authorized user. If you cannot return the authorized user's card or access checks and if you request your account to be closed, we will close your account and you may apply for a new account.

**17. LIABILITY FOR UNAUTHORIZED USE-LOST/STOLEN CARD NOTIFICATION.** You may be liable for the unauthorized use of your card or account. Notify us immediately, in writing or by telephone, at (844) 769-2667 24 Hours a Day/Seven (7) Days a week, if your card is lost, stolen, or you suspect there has been unauthorized use of your card or account. After we receive your notification, you will not be liable for any further unauthorized use of your card or account.

If you are an organization with 10 or more employees and we have issued 10 or more cards on your account for use by your employees, **you will be liable for all unauthorized use** of your cards or account before notification to us unless your liability may be limited by Visa liability limitation rules as set forth below. Otherwise, you will be

liable for up to \$50 for the unauthorized use of your card or account before notification to us unless your liability is further limited by Visa liability limitation rules as set forth below. Unauthorized use does not include use of a card by an authorized user in an unauthorized manner.

You may not be liable for any unauthorized transactions unless you are found to be fraudulent or negligent in the handling of your card or account.

**18. CREDIT REVIEW AND RELEASE OF INFORMATION.** You authorize the Credit Union to investigate your credit standing when opening or reviewing your account. You authorize the Credit Union to disclose information regarding your account to credit bureaus and creditors who inquire about your credit standing. If your account is eligible for emergency cash and/or emergency card replacement services, and you request such services, you agree that we may provide personal information about you and your account that is necessary to provide you with the requested service(s).

**19. RETURNS AND ADJUSTMENTS.** Merchants and others who honor your card may give credit for returns or adjustments, and they will do so by sending the Credit Union a credit slip which will be posted to your account. If your credits and payments exceed what you owe the Credit Union, the amount will be applied against future purchases and cash advances. If the credit balance amount is \$1 or more, it will be refunded upon your written request or automatically after six (6) months.

**20. ADDITIONAL BENEFITS/CARD ENHANCEMENTS.** The Credit Union may from time to time offer additional services to your account, such as travel accident insurance or a liability waiver program, at no additional cost to you. You understand that the Credit Union is not obligated to offer such services and may withdraw or change them at any time.

**21. EFFECT OF AGREEMENT.** This Agreement is the contract which applies to all transactions on your account even though the sales, cash advances, credits, or other slips you sign or receive may contain different terms.

**22. NO WAIVER.** The Credit Union can delay enforcing any of its rights any number of times without losing them.

**23. STATEMENTS AND NOTICES.** Unless separate subaccounts have been set up under your account for authorized users, statements and notices will be mailed to you at the appropriate address you have given the Credit Union. You agree to notify us at least 10 days in advance of any change in address. Notice sent to any one person bound under this Agreement will be considered notice to all. If we have agreed to send statements for subaccounts under your account that have been issued to authorized users, we will send statements to the appropriate address you have provided for that authorized user. You agree to notify us at least 10 days in advance of any change in address for an authorized user. You are responsible for payment of all amounts shown on a statement delivered to an authorized user.

**24. NOTIFICATION OF CHANGE IN LEGAL STRUCTURE, OFFICERS OR OWNERS.** If you are an organization, you agree to notify us within 10 days of any change in your legal structure or any change in your officers or owners.

**25. SEVERABILITY AND FINAL EXPRESSION.** This Agreement is the final expression of the terms and conditions of your account. This written Agreement may not be contradicted by evidence of any alleged oral agreement. Should any part of this Agreement be found to be invalid or unenforceable, all other parts of this Agreement shall remain in effect and fully enforceable to the fullest extent possible under this Agreement.

**26. GAMBLING TRANSACTIONS PROHIBITED.** You may not use your card to initiate any type of gambling transaction.

**27. CONVENIENCE CHECKS.** We may, from time to time, issue convenience checks to you that may be drawn on your account. Convenience checks may not be used to make a payment on your account. If you use a convenience check, it will be posted to your account as a cash advance. We reserve the right to refuse to pay a convenience check drawn on your account for any reason and such refusal shall not constitute wrongful dishonor. You may request that we stop the payment of a convenience check drawn on your account. You agree to pay any fee as identified in this Agreement imposed to stop a payment on a convenience check issued on your account. You may make a stop payment request orally, if permitted, or in writing. Your request must be made with sufficient time in advance of the presentment of the check for payment to give us a reasonable opportunity to act on your request. In addition, your request must accurately describe the check including the exact Account number, the payee, any check number that may be applicable, and the exact amount of the check. If permitted, you may make a stop payment request orally, but such a request will expire after 14 days unless you confirm your request in writing within that time. Written stop payment orders are effective only for six months and may be renewed for additional six-month periods by requesting in writing that the stop payment order be renewed. We are not required to notify you when a stop payment order expires.



If we re-credit your account after paying a check over a valid and timely stop payment order, you agree to sign a statement describing the dispute with the payee, to assign to us all of your rights against the payee or other holders of the check and to assist us in any legal action.

You agree to indemnify and hold us harmless from all costs and expenses, including attorney's fees, damages, or claims, related to our honoring your stop payment request or in failing to stop payment of an item as a result of incorrect information provided to us or the giving of inadequate time to act upon a stop payment request. Note: A convenience check is not a check as that term is defined under the Uniform Commercial Code. It is an advance from your credit card account with us and your stop payment rights are provided under this Agreement with us.

**28. GOVERNING LAW.** This Agreement is governed by the laws of the state of Wisconsin.

# Credit Card Authorization Designation

Member/Account Number: \_\_\_\_\_

\_\_\_\_\_ ("Business/Organization")

Location of principal office \_\_\_\_\_

State of organization (if applicable) \_\_\_\_\_

## FORM OF ORGANIZATION

- |                 |  |  |  |
|-----------------|--|--|--|
| Type of Entity: | <input type="checkbox"/> C Corporation       | <input type="checkbox"/> LLC (Limited Liability Company) | <input type="checkbox"/> Partnership:                |
|                 | <input type="checkbox"/> S Corporation       | Select Tax Classification:                               | <input type="checkbox"/> Unincorporated Organization |
|                 | <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> C = C Corporation               | <input type="checkbox"/> Association/Club            |
|                 |  | <input type="checkbox"/> S = S Corporation               | <input type="checkbox"/> Trust/Estate                |
|                 |  | <input type="checkbox"/> P = Partnership                 | <input type="checkbox"/> Other: _____                |
|                 |  | <input type="checkbox"/> General                         |  |
|                 |  | <input type="checkbox"/> Limited                         |  |
|                 |  | <input type="checkbox"/> Limited Liability               |  |

### ADOPTION BY VOTE OF GOVERNING MEMBERS

Note: Do not execute this section if organized as a sole proprietorship, partnership or limited liability company. The undersigned certifies that he/she is the custodian of the corporate seal (if any) and of the minutes and records of the above named Business/Organization and has been authorized and directed to certify to the Credit Union that the following attached documents are true and correct copies of resolutions and agreements duly adopted by a vote of the governing members of the Business/Organization in accordance with the law and, as applicable, the Articles of Incorporation, Bylaws or Code of Regulations, Constitution, Charter and/or rules of the Business/Organization; and that such resolutions have not been withdrawn or changed; and that all of the information provided above is true.

**X** \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

### ADOPTION BY UNANIMOUS WRITTEN CONSENT OF GOVERNING MEMBERS

The undersigned adopt on behalf of the Business/Organization the following attached resolutions and agree to all actions directed therein. The death or withdrawal of any person signed below shall not constitute a revocation of any authority granted by such resolutions until the Credit Union is notified in writing of such death and the extent of any resulting revocation. Furthermore, the undersigned certify(ies) that he/she/they constitute(s) all of the members vested with authority to make decisions on behalf of the Business/Organization and that no member with decision making authority has been omitted; that they are authorized to adopt resolutions by unanimous written consent; that all of the information provided above is true; that attached are true and correct copies of resolutions adopted by this unanimous written consent; that adoption of these resolutions is in accordance with the law and, as applicable, the Articles of Incorporation, Bylaws or Code of Regulations, Constitution, Charter and/or rules of the Business/Organization; and that such resolutions have not been withdrawn or changed.

Name (print)	Title	<b>X</b>	Date
Name (print)	Title	Signature	Date
Name (print)	Title	<b>X</b>	Date
Name (print)	Title	Signature	Date
Name (print)	Title	<b>X</b>	Date
Name (print)	Title	Signature	Date

**Execute one section only.**

**Authorization for Borrowing**

WHEREAS on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, it has been determined that it is in the best interest of Business/Organization to establish a borrowing relationship with Altra Federal Credit Union ("Credit Union").

BE IT RESOLVED AND AGREED, that the following person(s) is (are) designated as an Authorized Person and is (are) authorized to do the following:

- (1) Endorse or assign with or without recourse and deliver to the Credit Union for negotiation, discount, deposit, application to loan balances or for collateral purposes, notes, drafts, checks, certificates of deposit, acceptances, chattel paper, accounts, commercial and other business paper, now owned or hereafter acquired by the Business/Organization.
- (2) Execute and deliver to the Credit Union applications, agreements and other instruments the Credit Union requires for the issuance of letters of credit for the benefit of and to be held by the Business/Organization.

BE IT FURTHER RESOLVED AND AGREED, that the Credit Union will be notified promptly and in writing of any change of the Authorized Person(s) identified under this subpart.

BE IT FURTHER RESOLVED AND AGREED, that the Credit Union may rely on any actual or facsimile signature that reasonably resembles the facsimile or specimen signature of an Authorized Person provided in this subpart, in the exercise of any of the foregoing powers until notified in writing of a change; that the Credit Union shall not be held liable for refusing to honor any signature where the Business/Organization has not provided to the Credit Union a facsimile or specimen; that the Business/Organization holds the Credit Union harmless from and agrees to indemnify the Credit Union for all claims, demands, losses, costs, damages or expenses, including reasonable attorney's fees suffered or incurred by the Credit Union resulting from payments made or any other actions the Credit Union takes in good faith in reliance on the actual or facsimile signatures of an Authorized Person, provided that the signature of at least \_\_\_\_\_ Authorized Person(s) with respect to borrowing must appear on the appropriate document. *(The signature of only one (1) Authorized Signer is required if the foregoing blank is not completed.)*

**Authorized Person(s) for Borrowing**

\_\_\_\_\_  
Name (print) Title \_\_\_\_\_  
\_\_\_\_\_  
SSN \_\_\_\_\_ DOB \_\_\_\_\_  
\_\_\_\_\_  
Street Address \_\_\_\_\_  
\_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**X**

\_\_\_\_\_  
Facsimile/Specimen Signature  
Authority:  No Limit  Limited to:  
\_\_\_\_\_

\_\_\_\_\_  
Name (print) Title \_\_\_\_\_  
\_\_\_\_\_  
SSN \_\_\_\_\_ DOB \_\_\_\_\_  
\_\_\_\_\_  
Street Address \_\_\_\_\_  
\_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**X**

\_\_\_\_\_  
Facsimile/Specimen Signature  
Authority:  No Limit  Limited to:  
\_\_\_\_\_

\_\_\_\_\_  
Name (print) Title \_\_\_\_\_  
\_\_\_\_\_  
SSN \_\_\_\_\_ DOB \_\_\_\_\_  
\_\_\_\_\_  
Street Address \_\_\_\_\_  
\_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**X**

\_\_\_\_\_  
Facsimile/Specimen Signature  
Authority:  No Limit  Limited to:  
\_\_\_\_\_

\_\_\_\_\_  
Name (print) Title \_\_\_\_\_  
\_\_\_\_\_  
SSN \_\_\_\_\_ DOB \_\_\_\_\_  
\_\_\_\_\_  
Street Address \_\_\_\_\_  
\_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**X**

\_\_\_\_\_  
Facsimile/Specimen Signature  
Authority:  No Limit  Limited to:  
\_\_\_\_\_

BE IT FURTHER RESOLVED AND AGREED, that as noted below, this Authorization for Borrowing:

- Is the first Authorization for Borrowing presented to the Credit Union.
- Expressly revokes and replaces any and all prior Authorizations for Borrowing adopted by the Business/Organization and presented to the Credit Union.
- Supplements any and all prior Authorizations for Borrowing adopted by the Business/Organization and presented to the Credit Union.

*(If none of the above boxes are checked the Credit Union may assume that this document revokes and replaces any and all prior Authorizations for Borrowing that may be on file.)*



1700 Oak Forest Drive • Onalaska, WI 54650  
800-755-0055 • 608-787-4500  
www.altra.org

## CERTIFICATION REGARDING BENEFICIAL OWNERS OF LEGAL ENTITY MEMBERS

### WHAT IS THIS FORM?

To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity members. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

### WHO HAS TO COMPLETE THIS FORM?

This form must be completed by the person opening a new account on behalf of a legal entity with any of the following U.S. financial institutions: (i) a bank or credit union; (ii) a broker or dealer in securities; (iii) a mutual fund; (iv) a futures commission merchant; or (v) an introducing broker in commodities.

For the purposes of this form, a **legal entity** includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. **Legal entity** does not include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

### WHAT INFORMATION DO I HAVE TO PROVIDE?

This form requires you to provide the name, address, date of birth and Social Security number (or passport number or other similar information, in the case of Non-U.S. persons) for the following individuals (i.e., the **beneficial owners**):

- (i) Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity member (e.g., each natural person that owns 25 percent or more of the shares of a corporation); **and**
- (ii) An individual with significant responsibility for managing the legal entity member (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer).

The number of individuals that satisfy this definition of "beneficial owner" may vary. Under section (i), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (i), you must provide the identifying information of one individual under section (ii). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30% equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii) and four 25 percent equity holders under section (i)).

The financial institution may also ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this form.

CONTINUE TO THE FOLLOWING PAGE

**CERTIFICATION OF BENEFICIAL OWNER(S)**

Persons opening an account on behalf of a legal entity must provide the following information.

**a. Name and Title of Natural Person Opening Account:**

NAME	TITLE
------	-------

**b. Name, Type and Address of Legal Entity for Which the Account is Being Opened:**

NAME	TYPE	ADDRESS
------	------	---------

**c. The following information for each individual, if 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. If no individual meets this definition, please check "Beneficial Owner Not Applicable" below and skip to the next section.**
 Beneficial Owner Not Applicable
**BENEFICIAL OWNER 1**

NAME	DATE OF BIRTH	ADDRESS (Residential or Business Street Address)
SOCIAL SECURITY NUMBER*	PASSPORT OR OTHER ID NUMBER*	COUNTRY OF ISSUANCE*

**BENEFICIAL OWNER 2**

NAME	DATE OF BIRTH	ADDRESS (Residential or Business Street Address)
SOCIAL SECURITY NUMBER*	PASSPORT OR OTHER ID NUMBER*	COUNTRY OF ISSUANCE*

**BENEFICIAL OWNER 3**

NAME	DATE OF BIRTH	ADDRESS (Residential or Business Street Address)
SOCIAL SECURITY NUMBER*	PASSPORT OR OTHER ID NUMBER*	COUNTRY OF ISSUANCE*

**BENEFICIAL OWNER 4**

NAME	DATE OF BIRTH	ADDRESS (Residential or Business Street Address)
SOCIAL SECURITY NUMBER*	PASSPORT OR OTHER ID NUMBER*	COUNTRY OF ISSUANCE*

**d. The following information for one individual with significant responsibility for managing the legal entity listed above, such as:**

- An executive officer or senior manager (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer); or
- Any other individual who regularly performs similar functions (if appropriate, an individual listed under section (c) above may also be listed in this section (d)).

NAME	ADDRESS (Residential or Business Street Address)	
TITLE	DATE OF BIRTH	
SOCIAL SECURITY NUMBER*	PASSPORT OR OTHER ID NUMBER*	COUNTRY OF ISSUANCE*

\* For U.S. Persons: Provide a Social Security Number.

For Non-U.S. Persons: Provide a Social Security Number, passport number and country of issuance, or other similar identification number, such as an alien identification card number or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.

**CERTIFICATION SIGNATURE**

I, \_\_\_\_\_ (name of natural person opening account), hereby certify, to the best of my knowledge, that the information provided above is complete and correct.

Signature	Date
<b>X</b>	(Seal)