

STARION BANK

Business Credit Card Application

Credit Card Product:

Business Cash Back Business Rewards

Applicant

Business Name:		Tax ID Number:
Business Street Address:		
Phone Number:	E-mail Address:	
Cell Number:		
Type of Business:	Nature of Business:	
Year Company Started:	Number of Employees:	

Company Performance

1. Has the applicant operated at a loss during the past 3 years?	
2. Has the applicant or any of its principals declared bankruptcy in the past 10 years?	
3. Is the business or any of its principals currently involved in any pending or ongoing litigation?	
Primary Bank Business Relationship:	Today's Date:
Total Cash:	Total Assets:
Gross Profit:	Total Liabilities:
Net Income:	Total Business Net Worth:

Applicant Debt Schedule

Financial Institution:	Loan Origination Date:	Loan Number	Original Amount:	Loan Maturity Date:	Interest Rate:	Current P+I Payment:	Current Loan Balance:

Card Setup Information. The following individuals of the applicant are authorized to request additional cards, change individual credit limits, and add/delete authorized users.

Name:	Birthdate:	SSN:	Phone:	E-mail:
Name of the applicant as it should appear on the card (limit 25 characters):			Requested Statement Date:	

Authorized Users. Minimum age for authorized users is 21.

If you are requesting more than four (4) cards, please provide additional names and required information for each cardholder on business letterhead, with a signed acknowledgement by an authorized signer for the account. Each authorized user will be issued a card. The persons you list below are designated as authorized users. For each card issued, you must designate an individual credit limit. The total of the individual authorized credit limits cannot exceed the applicant's approved credit limit.

Authorized User Name:	Phone Number:	E-mail Address:	Credit Limit:

Authority to Apply

BY SIGNING THIS APPLICATION, each of the undersigned individuals promises, certifies and represents to Starion Bank (the "Bank") that all of the following statements are true: (i) I am an authorized officer or representative of the Applicant identified above; (ii) I have been duly appointed by the Applicant in accordance with the Applicant's Articles of Incorporation, Bylaws, Certificate of Formation, or other chartering documents and applicable laws and regulations effective in the jurisdiction in which the Applicant is organized; (iii) I am authorized and empowered, alone, to represent, bind and act on behalf of the Applicant with respect to all matters involving this Application and the credit card account for which the Applicant is applying; (iv) my authority includes the right, on the Applicant's behalf, to (a) sign this Application; (b) apply for credit; (c) designate, appoint and remove any Authorized User; (d) incur debt; and (e) increase, decrease or terminate the credit limit of any Authorized User; (v) each

Authorized User identified above is authorized to obtain a card and incur debt on behalf of the Applicant; (vi) the Bank is entitled to rely without investigation upon the list of Authorized Users and other information provided in this Application until the Bank receives written notice of any changes and has had a reasonable opportunity to act on such notice; and (vii) I will notify the Bank immediately if any Authorized User is added or removed, or should any of the foregoing representations become untrue. BY SIGNING THIS APPLICATION, the Applicant, the Guarantor(s) and the undersigned acknowledge, accept and agree with all of the following statements: All information provided on this Application is true, correct and complete. The Bank is authorized to obtain from time to time consumer credit reports and business credit reports on the Applicant, each Guarantor, and any other individual named in this Application for use in assessing creditworthiness. The Bank reserves the right to offer a different credit limit than the one requested on this Application. If this Application is approved, the Applicant requests that the Bank open a Business Credit Card Account ("Account") and issue cards ("Cards") to the Authorized Users designated on this Application. All Cards will be used for business or commercial purposes and not for personal, family or household purposes. The terms and conditions of the Bank's Credit Cardholder Agreement ("Agreement"), govern all aspects of the Account and use of the Cards, a copy of which will be mailed to the applicant if this Application is approved. Any use of a Card will be deemed to be an acceptance by the Applicant, each Guarantor and all Authorized Users of the terms of the Agreement.

Applicant's Signature(s)

Signature(s):	Name:	Title:	Date:
Signature(s):	Name:	Title:	Date:

Transfer of Balance Request

Upon approval, by signing below, you are requesting a balance transfer from another financial institution or company to your new Credit Card account with the Bank. Please submit a copy of the statement you like us to transfer on your behalf. By signing below, I understand that the Bank will advise me when the payment was mailed or if the Bank was unable to process my transfer for any reason. I am responsible for the payments until the Bank has notified me of when the payment was mailed on my behalf. The Bank will not be responsible for any charges billed to me for the accounts listed below.

VISA MasterCard® Other Account No. Please attach/send a copy of your last statement.

Signature(s)

Personal Guarantee(s)

In consideration of the credit to be extended to the Applicant, the undersigned Guarantor(s) jointly, severally and unconditionally agree to pay the Bank all obligations at any time outstanding with respect to any Business Credit Card Account opened by the Bank for the Applicant. Each Guarantor agrees that he/she (i) is separately and primarily liable for all such obligations, and (ii) will remain liable regardless of any change of employment, ownership or other position with the Applicant, until such Guarantor has notified the Bank in writing of the change and until a replacement Guarantor satisfactory to the Bank has been approved. Additional obligations of each Guarantor are set forth in the Bank's Business Credit Cardholder Agreement, and each Guarantor agrees to be bound by such additional obligations.

Name:	Date of Birth:	Social Security No.:
Current Address:	City State Zip:	
Phone:	E-mail Address:	Employer:
Income:	Additional Income:	<input type="checkbox"/> Approved to Redeem Rewards

Guarantor(s) Signature:

Name:	Date of Birth:	Social Security No.:
Current Address:	City State Zip:	
Phone:	E-mail Address:	Employer:
Income:	Additional Income:	<input type="checkbox"/> Approved to Redeem Rewards

Guarantor(s) Signature:

Name:	Date of Birth:	Social Security No.:
Current Address:	City State Zip:	
Phone:	E-mail Address:	Employer:
Income:	Additional Income:	<input type="checkbox"/> Approved to Redeem Rewards

Guarantor(s) Signature:

Name:	Date of Birth:	Social Security No.:
Current Address:	City State Zip:	
Phone:	E-mail Address:	Employer:
Income:	Additional Income:	<input type="checkbox"/> Approved to Redeem Rewards

Guarantor(s) Signature:

You need not furnish alimony, child support or maintenance income information if you do not want us to consider it in evaluating your application.

For the safekeeping of your personal information, please complete the application and deliver it to a representative at your nearest branch.

Important Information about procedures for opening a new account: 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 entity that opens an account. What this means for you: When you open an account, we will ask your name, street address, federal identification number, and other information that will allow us to identify your business entity or you.