



- Visa Commercial Card
- Visa Commercial Travel Rewards Card
- Visa Purchasing Card

**For Internal Use Only**

Branch No.	Associate Name	ID No.
------------	----------------	--------

Card Center, P.O. Box 410436, Kansas City, MO 64141-0436

UMB complies with Section 326 of the U.S.A. Patriot Act. This law mandates that we collect and verify certain information about you while processing your account application. Please contact a bank representative if you have questions.

**BUSINESS INFORMATION**

Applicant Legal Business Name

Physical Business Street Address (Include Number, Street, City, State and Zip Code. Do not use PO Box.)

Mailing Address (if different from Physical Address, above)	Website Address (URL)
---	-----------------------

SIC Code	Gross Annual Revenue	Tax Identification Number (required)
----------	----------------------	--------------------------------------

Detailed Description of Business	Year Established	Number of Employees
----------------------------------	------------------	---------------------

Organizational Structure  Corporation  Subchapter S Corp.  Limited Partnership  General Partnership  Limited Liability Company  Sole Proprietor  Non-Profit/Govt.

Location of Primary Trade Area  Local Only  Statewide  Multi-State  Regional  National  International

Company Telephone Number	Company Fax Number ( )
--------------------------	------------------------

Card Coordinator	E-Mail Address
------------------	----------------

Company Official to Receive Statements	E-Mail Address
--	----------------

Company Official to Receive Mgmt Reports	E-Mail Address
--	----------------

**FINANCIAL REFERENCES**

Primary Bank	Checking Account No.	Telephone
--------------	----------------------	-----------

Street Address (Include Number, Street, City, State and Zip Code)	Primary Officer
---	-----------------

Account Types  Checking  Investments  Cash Management  Loans  Bankcard Deposits

Secondary Bank Name	Checking Account No.	Telephone
---------------------	----------------------	-----------

Address (Include Number, Street, City, State and Zip Code)	Primary Officer
--	-----------------

Account Types  Checking  Investments  Cash Management  Loans  Bankcard Deposits

Business or Trade Reference	Telephone
-----------------------------	-----------

Address (Include Number, Street, City, State and Zip Code)

**AGREEMENT & ACCEPTANCE**

The business entity (the "Company") identified in this Application hereby requests UMB Bank, n.a., Kansas City, Missouri, or its successors or assigns ("UMB" or "Issuer"), to establish a credit card authority for the Company pursuant to which Issuer will open one or more credit card accounts ("Account(s)") in the name of the Company and will issue one or more commercial credit cards or card numbers ("Card(s)") to the Company and/or employees or agents of the Company (collectively, "Employees") to be used for Company-related business, commercial or agricultural purposes. The person who signs this Application on behalf of the Company represents he or she is duly authorized by the Company to sign this Application and to bind the Company to the Provisions and Terms Governing Accounts, as set forth on the following page.

The Company authorizes Issuer to investigate the Company's creditworthiness and payment history and to otherwise verify the information contained in this Application. The Company certifies that all information contained in this Application is true and correct.

Name of Company \_\_\_\_\_, a \_\_\_\_\_ organized under \_\_\_\_\_ law.  
Type of Business \_\_\_\_\_ Entity State \_\_\_\_\_

BY: Signature of Authorizing Officer	Printed Name of Authorizing Officer	Date Signed
---	-------------------------------------	-------------

See page 3 for important rates, fees and other cost information.

**For Internal Use Only**

Loan Type <input type="radio"/> T <input type="radio"/> P <input type="radio"/> U	GAR	Company ID
--	-----	------------

## PROVISIONS & TERMS GOVERNING ACCOUNTS

Thank you for completing this Application for a Visa Commercial / Purchasing Credit Card. Please keep a copy of this Application, after it has been completed and signed and before it is delivered to Issuer. Issuer will retain this Application whether or not it is approved.

If this Application is approved, Issuer will inform the Company of the amount of the Company's credit card authority. Issuer will rely on the information provided in this Application and any attached sheets regarding (a) the number of Accounts to open; (b) the requested controls for each Account; (c) the identity of Employees, if any, whose names are to be printed on Cards, in addition to the Company's name; (d) where to send copies of the Monthly Statements for each Account; and, (e) other pertinent information. Issuer will then issue Cards in accordance with the credit authority established for the Company. Subsequently, the Company may give Issuer notice of the same information for additional Employees authorized to use Cards, requested changes in controls for Accounts, and of termination by the Company of an Employee's authorization to use a Card. A termination notice should be accompanied by the Employee's Card, cut in half. Issuer will not be obligated to recognize changes, additions, deletions or other information contained in a notice until after receiving the notice and having had a reasonable period of time thereafter to act thereon.

Upon the issuance of Cards, as set forth herein, (i) the Company, by using or authorizing Employees to use cards, will be deemed to be in agreement, and will comply, with all of the terms and conditions stated in the Cardholder Agreement (the "Agreement") that will accompany the Cards; (ii) the Company will instruct Employees who use Cards to use them in accordance with the Agreement; (iii) the Company will pay when due all charges made to each Account; (iv) Issuer may answer questions and give information to others concerning Issuer's credit experience with the Company.

### NAMES OF INDIVIDUALS TO BE ISSUED SEPARATE CARDS - *Please print. Use separate sheet if necessary.*

Name		
Title	Requested Credit Limit \$	Social Security Number —Last 4 Digits

Name		
Title	Requested Credit Limit \$	Social Security Number —Last 4 Digits

Name		
Title	Requested Credit Limit \$	Social Security Number —Last 4 Digits

Name		
Title	Requested Credit Limit \$	Social Security Number —Last 4 Digits

### ACCOUNT SET UP

- Check A or B    **A**  Individual Billing (will allow individual cardholders to redeem points if enrolled in the Rewards Program) or  
**B**  Consolidated Billing
- Check C (optional)    **C**  Set Spending Controls on Purchasing Card. If checked, a member of the Commercial Card Services team will contact you.
- Check D (optional)    **D**  Travel Rewards Program (available on Visa Commercial Card only - \$50 Annual Fee per Card applies; see disclosures for details)

### ACCOUNT SET UP

COMPANY NAME TO APPEAR ON CARDS (19 CHARACTERS): \_\_\_\_\_

### APPLICATION COMPLETION CHECKLIST

- Completed Application     Organization Resolution and Agreement for Credit Card Program
- Guaranty Form (required for companies open less than 2 years)     Personal Financial Statement (required for companies open less than 2 years)
- Company Balance Sheet and Income Statement for last two fiscal years (required for aggregate credit lines over \$3,500)

**You may submit your completed Application:**

- **By fax.** Please fax to: **816.860.3152**
- **By email.** Please email to:  
**BankcardCredit.Commercial@UMB.com**
- **By mail.** Please mail to:  
**Card Services**  
**Commercial Card Department**  
**P.O. Box 410436**  
**Kansas City, MO 641641-0436**

# UMB VISA COMMERCIAL CREDIT CARDS

Please keep this page for your records.

## DISCLOSURE INFORMATION

Annual Percentage Rate (“APR”) for Purchases	Visa Commercial / Purchasing Credit Card <b>13.50%</b> Visa Commercial Travel Rewards Credit Card <b>9.40%</b> These APRs will vary with the market based on the Prime Rate, as explained below.
Annual Percentage Rate (“APR”) for Cash Advances	Visa Commercial / Purchasing Credit Card <b>17.50%</b> Visa Commercial Travel Rewards Credit Card <b>13.40%</b> These APRs will vary with the market based on the Prime Rate, as explained below.
Variable Rate Information	The APR for Purchases is determined monthly by adding <b>8.00%</b> to the Prime Rate for the UMB Visa Commercial / Purchasing Credit Card and <b>3.90%</b> to the Prime Rate for the UMB Visa Commercial Travel Rewards Credit Card. The APR for Cash Advances is determined monthly by adding <b>12.00%</b> to the Prime Rate for the UMB Visa Commercial / Purchasing Credit Card and <b>7.90%</b> to the Prime Rate for the UMB Visa Commercial Travel Rewards Credit Card.  The Prime Rate will never be less than <b>5.25%</b> . See explanation below. <sup>1</sup>
Grace Period for Repayment of the Balance of Purchases	At least 25 days when you pay your balance in full each month.
Annual Membership Fee	UMB Visa Commercial / Purchasing Credit Card: <b>None</b> UMB Visa Commercial Travel Rewards Credit Card: <b>\$50 per Card</b>
Minimum Finance Charge	Fifty cents ( <b>\$0.50</b> )
Transaction Fees	<b>Late Fee: \$15</b> if New Balance is less than \$100; <b>\$29</b> if New Balance is from \$100 to \$999.99; <b>\$39</b> if New Balance is \$1,000 or more. <b>Cash Advance Fee: 3%</b> of Cash Advance amount, with a \$10 minimum, no maximum on the amount of the fee. <b>Over Limit Charge: \$35</b>  <b>Returned Payment Charge: \$29</b> if a check or ACH payment on your account is returned for insufficient funds. Other fees may apply.

**How We Will Calculate Your Balance:** We use a method called two cycle average daily balance (including new purchases).

**Billing Rights:** Information on your rights to dispute transactions and how to exercise those rights is provided in your Cardmember Agreement.

<sup>1</sup> The Prime Rate used to determine the APR for Purchases and for Cash Advances is the highest Prime Rate published in The Wall Street Journal on the fifteenth (15th) day of each month, or the next business day if the 15th falls on a weekend or holiday provided, however, that the Prime Rate used to determine the APR for Purchases and for Cash Advances will never be less than 5.25%. The periodic rate finance charge for Purchase Advances and Cash Advances will not exceed a 25.00% Annual Percentage Rate.

**IMPORTANT:** The information about the costs of the cards described above is accurate as of February 1, 2019, the date this document was most recently revised. This information may have changed after that date. To find out what may have changed, write to us at UMB, Post Office Box 410436, Kansas City, Missouri 64141-0436 or call 888-494-5141.

The Federal Government requires all financial institutions to provide the following notices to commercial applicants with gross revenues of one million dollars or less.

**NOTICE:** The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding good faith contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Bureau of Consumer Financial Protection, 1700 G Street NW, Washington DC 20006.

If an application for business credit is denied, the applicant has the right to a written statement of the specific reasons for denial. To obtain the statement, the applicant should contact UMB Bank Commercial Card Services, P.O. Box 419226, Kansas City, Missouri 64141-6226, or a Commercial Card Representative at 888-494-5141 within 60 days from the date the applicant is notified of our decision. A written statement of reasons for the denial will be sent within 30 days of receiving the request.