



Prairie State Bank & Trust

Credit Application

Mastercard® Business Card

Please Check Account Choice: (Only One)

☐ Sole Owner
☐ LLC

☐ Partnership
☐ Not-for-Profit

☐ Corporation
☐ Municipality

COMPANY APPLICANT INFORMATION	Legal Name of Company			DBA		Tax I.D. Number	
	Company Address		City	State	Zip Code	Business Phone	
	Mailing Address (if different)		City	State	Zip Code	Credit Line Requested Amount	
	Type of Business	How Many Years in Business		Fiscal Year-End		Bill to: ____ Cardholder ____ Central Bill	
PRIMARY APPLICANT (OFFICER OR OWNER)	Last Name		First Name		Middle Name		Social Security Number
	Company Title ____ President ____ V.P. ____ CFO ____ Treasurer ____ Partner ____ Owner ____ Other: _____			Monthly Gross Personal Income		Date of Birth	
	Home Address		City	State	Zip Code	Mobile Phone	
	Ownership % (1)		Credit Line Amount		E-mail Address		Business Phone
ISSUE A CREDIT CARD TO THE FOLLOWING INDIVIDUALS <small>Attach additional sheet if necessary</small>	Last Name		First Name		Middle Name		Social Security Number
	Home Address		City	State	Zip Code	Date of Birth	
	Company Title		Credit Line Amount		Mobile Phone		Business Phone
	Last Name		First Name		Middle Name		Social Security Number
	Home Address		City	State	Zip Code	Date of Birth	
	Company Title		Credit Line Amount		Mobile Phone		Business Phone
CREDIT INFORMATION <small>Attach additional sheet if necessary (with Signatures)</small>	Institution Name and Address			Checking Account Number		Savings Account Number	
	Name of Trade References		Name Under Which Account is Carried		Account Number	Balance	Monthly Payment
	1					\$	\$
	2					\$	\$
	3					\$	\$
4. Institution Credit Card/Institution Name and Address							
BUSINESS FINANCIAL INFORMATION <small>Bank reserves the right to require additional information</small>	Current Assets \$			Total Assets \$		Gross Revenue \$	
	Current Liabilities \$			Total Liabilities \$		Net Income \$	
	IMPORTANT: To process your application, include either a current financial statement (balance sheet & income statement) or your most recent business tax return. Additional Financial Information may be requested.						
BENEFICIAL OWNERS	(1) Other owners with 25% or more ownership of the business (attach additional sheet if necessary)						
	Full Legal Name				Full Legal Name		
	Home Address				Home Address		
	SS#	Date of Birth	Ownership %		SS#	Date of Birth	Ownership %
AUTHORIZED SIGNATURE	By signing below you attest that you are an owner, officer or partner of the company indicated on this application with the authority to bind the company to the terms and conditions of our Business Credit Card Agreement and are agreeing to the terms on your own behalf and that of the company; you agree to be personally responsible, both individually and jointly with the Company, for payment of all balances incurred on all cards issued pursuant to this application now and whenever such additional cards may be established in the future; you authorize us to obtain credit bureau reports, employment and income information about you from third parties that we will use when considering this application; and you consent that by providing us any mobile phone numbers we may use text messaging, prerecorded messaging and autodialing technology for informational and service calls to those numbers. You understand that if you leave the employment of the company, you will continue to be responsible for the outstanding balances on the accounts. If an account is opened, you agree that you and the company are bound to the terms of the Business Credit Card Agreement we provide, as amended from time to time; and that receipt and acceptance of such agreement is conclusively presumed by your initial or continued use of the account or any card, authorizing their use, or making any payment on the account.						
	SIGNATURE OF PRIMARY APPLICANT (OFFICER OR OWNER) x _____ x _____ <div style="display: flex; justify-content: space-between;"> Signature Date Print Name </div>						

Please send completed application to Prairie State Bank & Trust C/O Credit Card Processing, 2653 W Lawrence Avenue, Springfield, IL 62704 or you can visit www.psbank.net to determine the closest branch to drop off the application. Any questions please contact us at 1-800-597-2977.

Important Disclosures

Interest Rates and Interest Charges

Annual Percentage Rate (APR) for Purchases	0.00% Introductory APR for the first 6 months following the opening of your account for transactions posted within 90 days of account opening. After that, this APR will be 10.99% to 15.74% based on your creditworthiness when you open your account. This APR will vary with the market based on the Prime Rate but will never be less than 10.99%.*
APR for Balance Transfers	0.00% Introductory APR for the first 6 months following the opening of your account for transactions posted within 30 days of account opening. After that, this APR will be 10.99% to 15.74% based on your creditworthiness when you open your account. This APR will vary with the market based on the Prime Rate but will never be less than 10.99%.*
Penalty APR	None
Paying Interest	Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on purchases and/or balance transfers if you pay your entire balance by the due date each month.
Minimum Finance Charge	If you are charged interest, the charge will be no less than \$1.00.
Fees	
Annual Fee	None
Transaction Fees • Balance Transfers • Foreign Transactions	Either \$10 or 3.0% of the amount transferred, whichever is greater (maximum fee \$100) 3.0% of each transaction in U.S. Dollars
Penalty Fees • Late Payment • Returned Payment	\$35 \$35
Other Fees • Rush Card Fee	\$30

How we will calculate your balance: We use a method called "average daily balance (including new purchases)."

Except as provided above in Paying Interest, purchases and balance transfers begin to accrue interest from the date of the transaction or, at our option, from the date they are posted to the account.

*We calculate variable APRs by adding a margin of 5.49%, 9.49% or 12.49% to the highest U.S. Prime Rate published in the Money Rates section of The Wall Street Journal on the last business day of the calendar month preceding the first day of the billing cycle. The APR is subject to a minimum and will never be less than 10.99%.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, Federal laws require all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means to you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.