

Business Card Company Profile

This form is used to establish a new **Authorized Officer (AO)** for a Business Card account issued through U.S. Bank National Association. The Authorized Officer is authorized by the Company to execute binding agreements on the Company's behalf and is required to be a Cardmember. The Authorized Officer and the Authorized Representatives are the only person(s) who can make changes to the account(s) such as adding, changing, and/or deleting Cardmembers. The Authorized Officer accepts responsibility as described below. **Please notify us immediately if there is a change in the Authorized Officer.**

Company Information (Required)

Existing Company Profile Number (CPN) OR Credit Card Account Number		Tax Identification Number	
Organized As (Check One): <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other			
Name of Company			
Address (No P.O. Boxes Allowed)		City	State Zip
() / /			\$
Company Phone Number	Date Established (MM/DD/YYYY)	Nature of Business	Gross Annual Sales

Authorized Officer Information

The AO is the designated person who is authorized to make changes such as adding or closing accounts and making line increase requests. If this person does not currently have a credit card account with U.S. Bank, he/she will be underwritten, which may affect the Company's credit line.

Authorized Officer Title (Check One) <input type="checkbox"/> President/Chairman <input type="checkbox"/> Owner/Proprietor <input type="checkbox"/> Vice President <input type="checkbox"/> Treasurer <input type="checkbox"/> Partner <input type="checkbox"/> Other			
Name of Authorized Officer (First, Middle, Last)		Date of Birth (MM/DD/YYYY)	Personal Social Security Number (Required)
Home Address (No P.O. Boxes Allowed)		City	State Zip
How Long at This Address?		E-mail Address (optional)	
() ()		\$	
Home Phone Number	Cell Phone Number (optional)	Average Monthly Spend	

Applicant Agreement

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 who opens an account. What this means for you: When you open an account, we will ask you for your name, address, date of birth and other information that will allow us to identify you. We may ask to see your driver's license or other identifying documents.

Important Terms and Application Agreement

Authorized Officer authorizes U.S. Bank National Association ("we", "us", or "our") to obtain a consumer credit report and a business credit report for use in assessing his/her personal creditworthiness in connection with an application by Company, of which Authorized Officer is an employee, principal, owner, partner, officer, or guarantor, for a SKYPASS Visa® Business Card (each a "Business Card") Account. We need such consumer reports because Authorized Officer may have direct, contingent, present, or future liability to us for the Company's obligation in connection with the Account. All applicants agree that, as long as the Account is open, we may obtain credit reports about the applicants from time to time. We reserve the right to consider the applicant for a lower line of credit if one was requested. This application must be signed by an Authorized Officer with authority to bind the Business to the terms of this Application Agreement. The Authorized Officer certifies that the execution, delivery and performance of this Application has been authorized by all necessary corporate action by the Business, and will provide evidence of such action upon request. If the Business is approved for the Business Card Account, the Authorized Officer requests and directs us to open a Business Card Account ("Account") and to issue Business Cards ("Cards") to any individual Employees of the Business, including the Authorized Officer, designated by the Authorized Officer on this Application or its addendum, or by any process agreed to by us and the Business. The Authorized Officer and each individual Employee applicant understand and agree that the Business, the Authorized Officer, and the individual Employees will be liable for charges to the Account as follows: 1) the Business is jointly and severally liable with each individual Employee as to that individual Employee's charges; 2) the Authorized Officer and each individual Employee is individually liable as to their respective individual charges; and 3) the Authorized Officer is individually liable and jointly liable with the Business for all charges made to the Account. Each applicant understands and agrees that we may increase or decrease the APR or credit limit assigned to the Account and/or to the Cards within the Account or close the Account at any time based on our credit guidelines, credit report information, Account history, or the financial circumstances of the Cardmember. At the time the Account is opened, individual Employees, including the Authorized Officer, will be issued Cards and a Business Card Cardmember Agreement governing individual use of the Account and individual Employee liability for charges to the Account. By providing us with any telephone number used for a mobile or other wireless device now or in the future, including a number that you later convert to a cell phone number, you are expressly consenting to receiving communications - including but not limited to prerecorded or artificial voice message calls, text messages, and calls made by an automatic telephone dialing system - from us and our affiliates and agents regardless of the purpose of the communication. Calls and messages may incur access fees from your cellular provider. Use of the Card or the Account will signify acceptance of the terms of the Cardmember Agreement, which may be amended from time to time. All applicants must be at least 18 years old and agree that Accounts will be used primarily for business purposes, and not personal, family, or household purposes. Information from this Application may be shared with our affiliates. Cash access is subject to credit approval.

I have read this application and agree to its terms.

Signature of Authorized Officer/Applicant	Date
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Please forward this form to:

Cardmember Service
PO Box 6353
Fargo ND 58125-6353

Fax: 866-807-9053
Phone: 866-249-3790