



Return via Fax: (210) 637-4811 or
 Mail to: Farm Bureau Bank
 P.O. Box 33427
 San Antonio, Texas 78265-9865

If you are not a Farm Bureau Member, a \$250 application fee will apply and must accompany this application - along with the attached Tax Form 4506. Make check payable to Farm Bureau Bank.

Premier Business Visa® Application

Business Information

Business Name (Full Legal Name)	Tax ID Number	Date of Ownership	
Physical Address	City	State	Zip
Mailing Address (if different from Physical Address)	City	State	Zip
Email Address	Business Phone Number	Business Fax Number	

\$ _____ Gross Annual Sales
 \$ _____ Net Annual Income (after taxes)

How did you hear about us?

Agent Mail Web
 Insert Email Add
 Other _____

(Excludes Non-Profit Organizations)

Type of Business: _____ Years in Industry: _____

Specific Business Activity: _____

Legal Structure

Corporation Partnership LLC/PLLC Sole Proprietorship
 Other _____

Farm Bureau Agent Referral

If referred by a Farm Bureau Agent, please include name and referral source code (RSC).

Agent Name _____ Agent Referral Source Code _____

By entering this information, understand that this Farm Bureau Agent has requested that Farm Bureau Bank, P.O. Box 33427, San Antonio, Texas 78265-9865, extend credit to you. Information pertaining to your application may be shared with your agent in order to assist in the application process. To inquire about the status of your application, you may contact your Farm Bureau Agent or you may contact Farm Bureau Bank directly at (800) 492-3276.

Account Set Up

Organization Name to Emboss on Cards (Maximum of 21 characters, including spaces)

Preferred billing option (Check One):

Company Billing - All cardholders receive a statement, but payment is made at the Company level.
 Individual Billing - All cardholders receive a statement and are responsible for their own payment. A Company roll-up statement is provided.

Additional Cards

Complete only if you would like to add more employees other than guarantors to the account.

Your additional cards are free. (Name max 21 characters)

Name	Last 4 Digits of SSN	Date of Birth	Cell Phone #	Credit Limit
_____	_____	____/____/____	(____) _____	\$ _____
_____	_____	____/____/____	(____) _____	\$ _____
_____	_____	____/____/____	(____) _____	\$ _____

Guarantor 1

All owners with 25% or more ownership must complete application

First Name _____ MI _____ Last Name _____		Date of Birth _____ / _____ / _____	
Title _____		What is your Percentage of Ownership _____ %	Social Security Number _____ / _____ / _____
Home Phone Number _____	Cell Phone Number _____	Email Address _____	Mother's Maiden Name _____
Physical Address _____		City _____	State _____ Zip _____
Mailing Address (if different from Physical Address) _____		City _____	State _____ Zip _____
Time at Residence: _____ / _____	Type of Residence: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other: _____	Monthly Payment: \$ _____	
Drivers License # _____	State of Issue _____	Expiration Date _____ / _____ / _____	Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, you are not eligible for financing with Farm Bureau Bank.</i>
Years in Business _____	Years in Industry _____	Are you a Farm Bureau Member? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is your Farm Bureau Member Number? _____	
\$ _____ Monthly Net Income	\$ _____ Additional Income , if any (Your alimony, child support and separate maintenance income need not be disclosed if you do not wish to have it considered as a basis for repaying this obligation.)		

Guarantor 2

All owners with 25% or more ownership must complete application

First Name _____ MI _____ Last Name _____		Date of Birth _____ / _____ / _____	
Title _____		What is your Percentage of Ownership _____ %	Social Security Number _____ / _____ / _____
Home Phone Number _____	Cell Phone Number _____	Email Address _____	Mother's Maiden Name _____
Physical Address _____		City _____	State _____ Zip _____
Mailing Address (if different from Physical Address) _____		City _____	State _____ Zip _____
Time at Residence: _____ / _____	Type of Residence: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other: _____	Monthly Payment: \$ _____	
Drivers License # _____	State of Issue _____	Expiration Date _____ / _____ / _____	Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, you are not eligible for financing with Farm Bureau Bank.</i>
Years in Business _____	Years in Industry _____	Are you a Farm Bureau Member? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is your Farm Bureau Member Number? _____	
\$ _____ Monthly Net Income	\$ _____ Additional Income , if any (Your alimony, child support and separate maintenance income need not be disclosed if you do not wish to have it considered as a basis for repaying this obligation.)		

Guarantor 3

All owners with 25% or more ownership must complete application

_____/_____/_____
First Name MI Last Name Date of Birth

_____/_____/_____
Title What is your Percentage of Ownership % Social Security Number

Home Phone Number

Cell Phone Number

Email Address

Mother's Maiden Name

Physical Address

City

State

Zip

Mailing Address (if different from Physical Address)

City

State

Zip

Time at Residence: ____/____ Type of Residence: Own Rent Other: _____ Monthly Payment: \$ _____

Drivers License #

State of Issue

_____/_____/_____
Expiration Date

Are you a U.S. Citizen? Yes No
If no, you are not eligible for financing with Farm Bureau Bank.

Years in Business

Years in Industry

Are you a Farm Bureau Member? Yes No
If yes, what is your Farm Bureau Member Number? _____

\$ _____
Monthly Net Income

\$ _____
Additional Income, if any (Your alimony, child support and separate maintenance income need not be disclosed if you do not wish to have it considered as a basis for repaying this obligation.)

Guarantor 4

All owners with 25% or more ownership must complete application

_____/_____/_____
First Name MI Last Name Date of Birth

_____/_____/_____
Title What is your Percentage of Ownership % Social Security Number

Home Phone Number

Cell Phone Number

Email Address

Mother's Maiden Name

Physical Address

City

State

Zip

Mailing Address (if different from Physical Address)

City

State

Zip

Time at Residence: ____/____ Type of Residence: Own Rent Other: _____ Monthly Payment: \$ _____

Drivers License #

State of Issue

_____/_____/_____
Expiration Date

Are you a U.S. Citizen? Yes No
If no, you are not eligible for financing with Farm Bureau Bank.

Years in Business

Years in Industry

Are you a Farm Bureau Member? Yes No
If yes, what is your Farm Bureau Member Number? _____

\$ _____
Monthly Net Income

\$ _____
Additional Income, if any (Your alimony, child support and separate maintenance income need not be disclosed if you do not wish to have it considered as a basis for repaying this obligation.)

By submitting this form, I acknowledge that I have read and agree to the Terms and Conditions of this account. I am submitting this application on behalf of the company as its authorized representative and on behalf of myself as an individual guarantor of payment. I certify that I am an owner, officer or partner of the company with the authority to bind the company to the terms of the Premier Business Visa Card Agreement. I also, in my individual capacity (even though I may place a title or other designation next to my signature) unconditionally guarantee and promise to pay to Bank all indebtedness of the applicant at any time arising under or relating to this application as well as any extensions, increases, or renewals of that indebtedness.

I understand that you will not return this Application. I understand that I must provide all the information requested in the Premier Business Visa Application, any required financial statements or other information as may be necessary to process my application and certify that such information is accurate to the best of my knowledge as of the date provided. I authorize you to verify the information on the application and additional information and exchange information about me and the Company including requesting reports from credit reporting agencies for the sole purpose of an update, extension of credit, review or collection of this account. Upon my request, the Bank will inform me of the name and address of each consumer reporting agency from which it obtained a consumer credit report. I authorize you to verify employment history and to share any information you obtain about me with third parties including your affiliates.

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 the account. What this means for 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.

Please Sign Below

Authorizing Signature

Printed Name

Date