

**Business Credit Card Authorized User Request Form**

Account Number:

Loan ID:

Date:

Borrower's Name:

Guarantor(s) / Owner(s):

**Add an Authorized User:**

Name of Authorized User:

Address of User:

Social Security # of User:

Date of Birth of User:

Phone Number of User:

DL # or Passport #:

Title/Position with Company:

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**ACKNOWLEDGEMENT AND AUTHORIZATION**

By signing or otherwise authenticating as Guarantor(s) / Owner(s), you agree to repay all transactions made to your account by the Authorized User, as well as any interest charges and fees. You understand that this document is governed by the terms of the Business Credit Card Agreement.

**Signature of Guarantor / Owner:**

**Signature of Guarantor / Owner:**

Name:

Name:

By signing or otherwise authenticating as Authorized User, you agree to discontinue use of the account upon the death of an Owner, the account is closed, or if you are removed as an Authorized User by you, the Credit Union, or the Owner.

**Signature of Authorized User:**

Name: