

| INTEREST RATES AND INTEREST CHARGES                     | VISA® BUSINESS PLATINUM   | VISA® BUSINESS REWARDS    |
|---|---|---------------------------|
| Annual Percentage Rate (APR) <sup>1</sup> for Purchases | <b>11.75%<sup>2</sup></b><br><small>This APR will vary with the market based on the Prime Rate.</small>   | <b>14.75%<sup>3</sup></b> |
| APR for Balance Transfers <sup>1</sup>                  | <b>11.75%<sup>2</sup></b><br><small>This APR will vary with the market based on the Prime Rate.</small>   | <b>14.75%<sup>3</sup></b> |
| APR for Cash Advances                                   | <b>21.00%<sup>4</sup></b>   | <b>21.00%<sup>4</sup></b> |
| Penalty APR and When it Applies                         | None  | None                      |
| Paying Interest   | Your due date is at least <b>25</b> days after the close of each billing cycle. We will not charge you interest on purchases if you pay your entire balance by the due date each month. We will begin charging interest on cash advances and balance transfers on the transaction date. |                           |
| Minimum Interest Charge                                 | If you are charged interest, the charge will be no less than <b>\$1.00</b> .  |                           |

**For Credit Card Tips from the Consumer Financial Protection Bureau:** To learn more about factors to consider when applying for or using a credit card, visit the site of the Consumer Financial Protection Bureau at <http://www.consumerfinance.gov/learnmore>.

| FEES                    | VISA® BUSINESS PLATINUM   | VISA® BUSINESS REWARDS                     |
|-------------------------|---|--|
| Annual Fee              | None  | None                                       |
| Transaction Fees        |   |  |
| • Balance Transfer      | <b>3%</b> of transfer amount  | <b>3%</b> of transfer amount               |
| • Cash Advances         | <b>\$5.00 or 3%</b> (whichever is greater)  | <b>\$5.00 or 3%</b> (whichever is greater) |
| • Foreign Transaction   | Either 0.80% of the U.S. Dollar amount of the transaction if the transaction is made in U.S. Dollars or 1.00% of the U.S. Dollar amount of the transaction if the transaction is made in a foreign currency |  |
| Penalty Fees            |   |  |
| • Over-the-Credit Limit | <b>\$0.00</b>   | <b>\$0.00</b>                              |
| • Late Payment          | <b>\$25.00</b>  | <b>\$25.00</b>                             |
| • Returned Payment      | <b>\$25.00</b>  | <b>\$25.00</b>                             |

<sup>1</sup> This APR will vary with the market based on the Prime Rate. We calculate variable APRs by adding a margin to the highest U.S. Prime Rate published in the rates section of The Wall Street Journal on the 10th of each month. If the 10th falls on a day The Wall Street Journal does not publish, we will use the Prime Rate published on the last publishing day preceding the 10th. As of January 10, 2026, the Prime Rate was 6.75%.

<sup>2</sup> The purchase and balance transfer APRs are equal to the Prime Rate plus a margin of 5.00%. The purchase and balance transfer monthly periodic rates are equal to 0.9792%.

<sup>3</sup> The purchase and balance transfer APRs are equal to the Prime Rate plus a margin of 8.00%. The purchase and balance transfer monthly periodic rates are equal to 1.2292%. Your minimum payment for each billing period will be equal to the entire amount of your New Balance.

<sup>4</sup> The cash advance monthly periodic rate is equal to 1.75%.

Building a successful financial plan takes the right people. That's why we work hard to provide you with quality financial services and products, like our convenient and flexible Visa® Credit Cards.

They give you purchasing power that takes you places with worldwide service and access to valuable uChoose Rewards®.\* And, unlike those big town institutions, Springs Valley's cards come with the personal, friendly service you've come to expect from us.

So, whatever your lifestyle, choose the credit card that gives you the value and spending power you need and enjoy the rewards.

**Apply for yours today!**

**HOW WE WILL CALCULATE YOUR BALANCE:** We use a method called "average daily balance (including new transactions)." An explanation of this method is provided in your cardholder agreement.

**BILLING RIGHTS:** Information on your rights to dispute transactions and how to exercise those rights is provided in your cardholder agreement.

**LOSS OF INTRODUCTORY APR:** We may end your introductory APR and apply the standard APR to your purchases and balance transfers if you make a late payment.

# Business Credit Card Application



**springsvalley**

BANK & TRUST COMPANY

*Loyal to you, your family,  
and your future.*

**svbt.bank | 800.843.4947 | Since 1902**



\*uChoose Rewards® is a registered trademark of Fiserv, Inc.



**springsvalley**

BANK & TRUST COMPANY

*Loyal to you, your family,  
and your future.*

# VISA BUSINESS CREDIT CARD APPLICATION

Request type (select one)

- New Account  
 Line Increase

Credit Line

Credit Line Requested:

\$

Card Type Requested

- Visa Business Platinum  
 Visa Business Rewards

|                      |   |  |   |  |                                |  |                                     |
|----------------------|---|--|---|--|--------------------------------|--|-------------------------------------|
| BUSINESS INFORMATION | Legal Name of Business  |  | Business Name to Appear on Card   |  | Business Phone Number          |  |                                     |
|                      | Business Physical Address (No PO Boxes)   |  | Business Mailing Address  |  | Business Fax Number            |  |                                     |
|                      | City, State, Zip  |  | City, State, Zip  |  | Tax ID Number                  |  |                                     |
|                      | Legal Structure (Pick One)<br><input type="checkbox"/> Sole Prop <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> S Corp <input type="checkbox"/> Corporation |  | Non-Profit?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, include last two years financial statements, and copy of minutes showing authorization to apply.</i> |  | Other: _____                   |  | Month and Year Business Established |
|                      | Business Gross Sales (if new enter \$0)   |  | Business Net Profit (if new enter \$0)  |  | Business Monthly Debt Payments |  | Business Monthly Debt Payments      |
|                      | Nature of Business (Goods or Services provided) and/or Company's NAICS Code   |  |   |  |                                |  |                                     |

| AUTHORIZED PARTY #1        |                  |                           |                        |                         |                                 |  |
|----------------------------|------------------|---------------------------|------------------------|-------------------------|---------------------------------|--|
| Name (First, MI, Last)     | Title            | Percentage of Ownership % | Social Security Number | Date of Birth           | Personal Annual Gross Income \$ |  |
| Home Address (No PO Boxes) | City, State, Zip | Home Phone Number         | eMail Address          | Additional Phone Number |                                 |  |
| AUTHORIZED PARTY #2        |                  |                           |                        |                         |                                 |  |
| Name (First, MI, Last)     | Title            | Percentage of Ownership % | Social Security Number | Date of Birth           | Personal Annual Gross Income \$ |  |
| Home Address (No PO Boxes) | City, State, Zip | Home Phone Number         | eMail Address          | Additional Phone Number |                                 |  |
| AUTHORIZED PARTY #3        |                  |                           |                        |                         |                                 |  |
| Name (First, MI, Last)     | Title            | Percentage of Ownership % | Social Security Number | Date of Birth           | Personal Annual Gross Income \$ |  |
| Home Address (No PO Boxes) | City, State, Zip | Home Phone Number         | eMail Address          | Additional Phone Number |                                 |  |
| AUTHORIZED PARTY #4        |                  |                           |                        |                         |                                 |  |
| Name (First, MI, Last)     | Title            | Percentage of Ownership % | Social Security Number | Date of Birth           | Personal Annual Gross Income \$ |  |
| Home Address (No PO Boxes) | City, State, Zip | Home Phone Number         | eMail Address          | Additional Phone Number |                                 |  |

| CARDS TO ISSUE | Business fully understands and agrees that all Authorized Users listed below are the business' responsibility if the card(s) are lost or stolen and agree that the business will notify Springs Valley Bank & Trust Company of such loss. If the credit card is misused by an Authorized User, business accepts full responsibility. (SSN used as proof of identity only) If additional cards are needed please include information on the cardholder(s) on second application. |                                     |                             |  |  |                                     |                             |
|----------------|---|-------------------------------------|-----------------------------|--|--|-------------------------------------|-----------------------------|
|                | CARDHOLDER'S NAME (HOW NAME WILL APPEAR ON CARD)  | NEW CARD NUMBER (FOR BANK USE ONLY) | CREDIT LIMIT (INC OF \$100) |  | CARDHOLDER'S NAME (HOW NAME WILL APPEAR ON CARD) | NEW CARD NUMBER (FOR BANK USE ONLY) | CREDIT LIMIT (INC OF \$100) |
|                | Card 1  |                                     |                             |  | Card 4   |                                     |                             |
|                | Card 2  |                                     |                             |  | Card 5   |                                     |                             |
|                | Card 3  |                                     |                             |  | Card 6   |                                     |                             |

| SIGNATURES | This person will be authorized to obtain account information, as well as make changes to the account. Changes include, but are not limited to, address changes and addition/deletion of cardholders. It is the responsibility of an authorized party to inform Creditor of any changes to the contact person. (Limit Increase(s) must be requested by all authorized parties in writing and may require additional documentation, such as updated financial statements.) |               |                      |                   |
|------------|--|---------------|----------------------|-------------------|
|            | CONTACT NAME   | CONTACT TITLE | CONTACT PHONE NUMBER | CONTACT SIGNATURE |

**BY SUBMITTING THIS APPLICATION:** The undersigned Applicant and Business request Visa Business Card(s) be issued on the 'business' account to the Applicant and certify that the account will be utilized solely for business purposes. The individuals ("you") signing below acknowledge and agree to all the Terms and Conditions set forth in this application and that the documents submitted are verifiable and accurate. You understand that the creditor may ask for additional identifying documents from you and the business to assist with credit decisions and cooperate with the USA Patriot Act. You authorize the creditor to obtain your personal credit report and to provide credit information to credit bureaus about you if applicable. **GUARANTY:** By signing below, each individual jointly, separately and unconditionally guarantees payment of and agrees to pay creditor for all charges and balances on all accounts established with this application; and the undersigned does agree, upon any default in the making of any payment due by applicant or breach by applicant of any covenant or agreement, that the undersigned will, upon request by Springs Valley Bank & Trust Company pay the entire unpaid balance, all lawful charges and amounts thereunder. Under this Guaranty, the liability of Guarantor(s) is unlimited and the obligations of Guarantor are continuing, including any future credit limit increases. It is understood that this application will be retained whether or not approved.

|  |  |
|--|--|
| <b>X</b>   | <b>X</b>   |
| Applicant/Authorized Party #1, As Principal/Owner/Member And Individually as Personal Guarantor _____ Date | Applicant/Authorized Party #2, As Principal/Owner/Member And Individually as Personal Guarantor _____ Date |
| <b>X</b>   | <b>X</b>   |
| Applicant/Authorized Party #3, As Principal/Owner/Member And Individually as Personal Guarantor _____ Date | Applicant/Authorized Party #4, As Principal/Owner/Member And Individually as Personal Guarantor _____ Date |

**Credit Denial Notice:** With regard to a business that had gross revenues of \$1 million or less in its preceding fiscal year (other than an extension of trade credit, credit incident to a factoring agreement, or other similar types of business credit), and if its application for business credit is denied, a right to a written statement of the specific reasons for the denial may be requested. To obtain this statement, please contact Springs Valley Bank & Trust, P.O. Box 830, Jasper, IN 47547-0830, Phone: 800-843-4947 within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. The notice that follows describes additional protections extended to you.

**ECOA 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 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: FDIC Consumer Response Center, 1100 Walnut Street, Box #11, Kansas City, MO 64106.