

Place
Stamp
Here

First Florida Bank
PO Box 128
Destin, FL 32540



Apply for **First Florida Bank** Credit Card
and Start Earning **ScoreCard® Bonus Points**

850.269.1201 · WWW.FIRSTFLBANK.COM

Building a successful financial plan takes the right resources. That's why we work hard to provide you with quality financial services and products. Like our convenient and flexible Visa® Business Credit Card. They are accepted at thousands of locations worldwide for just about any type of purchase you can dream up. Unlike those big out-of-town institutions, our card comes with the personal friendly service you've come to expect from us. Whatever your plans, choose the credit card that gives you all the value and buying power you need to get your projects off the drawing board.

Apply for yours today!

First Florida Bank

WHEN you use the

First Florida Bank

Visa® Business Credit Card
for the purchase of goods or
services, the following
benefits are yours!

SCORECARD® BONUS POINTS

Earn Bonus Points for every net retail purchase you make with our First Florida Bank Credit Card! You can redeem Bonus Points for brand-name merchandise and exciting travel awards. Visit www.scorecardrewards.com and browse the current award selections. You will be amazed at what ScoreCard® has to offer! To find out how the plan works, ask one of our friendly representatives.

First Florida Bank

CREDIT APPLICATION

VISA® BUSINESS CARD

Credit Limit Requested \$ _____

Check Account Choice: (Only One)

- Sole Owner Corporation
 Partnership Limited Liability Corporation

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.

COMPANY INFORMATION

Name of Company			Tax I.D. Number	
Company Address	City	State	Zip Code	Business Phone
Type of Business				How Many Years in Business

ISSUE BUSINESS CREDIT CARDS TO THE FOLLOWING INDIVIDUALS:

Attain additional sheet if necessary (with signatures)

The information gathered for the individuals to receive the credit cards includes the signature at the bottom of each box.

Last Name	First	Middle	Social Security Number
Company Title		Division/Department	Date of Birth
Home Address	City	State	Zip Code
Signature	Limit for this Individual Card: \$		Income (if applicable)

Last Name	First	Middle	Social Security Number
Company Title		Division/Department	Date of Birth
Home Address	City	State	Zip Code
Signature	Limit for this Individual Card: \$		Income (if applicable)

CREDIT INFORMATION

Attach additional sheet if necessary (with signatures)

Institution Name and Address	Branch	Loans	<input type="checkbox"/> Open	<input type="checkbox"/> Closed
Checking Account Number / Name Listed		Savings Account Number / Name Listed		

Name and Address of Trade References	Name Under Which Account is Carried	Account Number	Balance	Monthly Payment
1.			\$	\$
2.			\$	\$
3. Institution Credit Card / Institution Name and Address			\$	\$

CONDENSED BUSINESS FINANCIAL STATEMENT

Bank reserves the right to require additional information

CURRENT ASSETS	\$	CURRENT LIABILITIES	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES	\$
IMPORTANT: THE FINANCIAL STATEMENT OR AN ATTACHED STATEMENT MUST BE COMPLETED BEFORE YOUR APPLICATION CAN BE PROCESSED.		NET WORTH (Total Assets Less Liabilities)	\$

SIGNATURE(S)

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: This statement is submitted to obtain credit and I / We certify that all information herein is true and complete. I / We agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of this institution. I / We agree to be bound by the terms and conditions of the bank card agreement, a copy of which will be mailed to the applicant if this application is granted, receipt of such agreement and acceptance of such terms to be conclusively presumed by the applicant's use. If this is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time.

AUTHORIZED OFFICER MUST BE ONE OF THE FOLLOWING (check one):

PRESIDENT/CHAIRMAN V.P. TREASURER OWNER PARTNER

X _____ **X** _____
 Applicant Signature Title Date Authorizing Signature Title Date

CREDIT DISCLOSURES

Annual Percentage Rate for Purchases	11.90% Fixed	Paying Interest	Your due date is at least 10 days after the close of each billing cycle. We will not charge you interest on Retail Purchases if you pay your entire balance by the due date. We will begin charging interest on cash advances and/or balance transfers on the transaction date.
Annual Percentage Rate for Cash Advances	11.90% Fixed		
Annual Percentage Rate for Balance Transfers	11.90% Fixed	Method of Computing the Balance for Purchases	Average Daily Balance Including New Purchases*
Minimum Finance Charge	\$1.50	<p>* A finance charge will be imposed on Credit Purchases only if you elect not to pay the entire new balance shown on your monthly statement for the previous billing cycle within 10 days from the closing date of that statement. If you elect not to pay the entire new balance shown on your previous monthly statement within that 10-day period, a finance charge will be imposed on the unpaid average daily balance of such Credit Purchases from the previous statement closing date and on new Credit Purchases from the date of posting to your account during the current billing cycle, and will continue to accrue until the closing date of the billing cycle preceding the date on which the entire new balance is paid in full or until the date of payment if more than 10 days from the closing date. The finance charge for a billing cycle is computed by applying the monthly periodic rate to the average daily balance of Credit Purchases, which is determined by dividing the sum of the daily balances during the billing cycle by the number of days in the cycle. Each daily balance of Credit Purchases is determined by adding to the outstanding unpaid balance of Credit Purchases at the beginning of the billing cycle any new Credit Purchases posted to your account, and subtracting any payments as received or credits as posted to your account, but excluding any unpaid finance charges.</p> <p>A finance charge will be imposed on Cash Advances from the date made or from the first day of the billing cycle in which the Cash Advance is posted to your account, whichever is later, and will continue to accrue on the unpaid average daily balance of such Cash Advances until the date of payment if paid during the same billing cycle, or until the closing date of the billing cycle preceding the date on which the entire new balance is paid in full or until the date of payment if more than 0 days from the closing date. If the new balance shown on your monthly statement for the prior billing cycle is paid in full within 0 days of the closing date of that statement, no finance charges will be imposed during the current billing cycle for Cash Advances posted to your account during previous billing cycles.</p>	
Annual Fee	\$29.95		
Balance Transfer Fee	\$5.00		
Foreign Transaction Fee	3.0%		
Late Payment Fee	Up to \$25.00		
Over-the-Credit Limit Fee	Up to \$25.00		
Temporary Increase Fee	\$25.00		
Replacement Card Fee	\$10.00		
Additional Card Fee	\$5.00		
Cash Advance Fee	None		
<p>The information about the costs of the cards described above is accurate as of October 2012. This information is subject to change. To receive the most up to date information, write us at First Florida Bank, PO BOX 128, Destin, FL 32540.</p>			

RETURNED CHECKS

Return Fee of up to \$25.00 will be charged for any returned checks

TRANSFER OF BALANCE REQUEST

Upon approval, I wish to transfer my present balance on the credit card account(s) listed below to my new First Florida Bank credit card account. The balance transfer will be subject to finance charges the day of posting to your new account.

Credit Card Issuer _____ Account Number _____

Payment Address _____ Amount to be Transferred \$ _____

City, State, Zip _____

X _____ **X** _____
 Applicant Signature Title Date Authorizing Signature Title Date

ADDITIONAL DISCLOSURES & TERMS AND CONDITIONS

By submitting this application, you: (1) acknowledge that you have reviewed the credit card Terms and Conditions; (2) agree to submit your application for this credit card subject to those Terms and Conditions; and (3) authorize us to use the information in your application, and any other information we or our affiliates have about you, to determine your ability to pay, as required by federal law.

The words "you" and "your" apply to each person who submits the application. You have read the accompanying application, and you affirm that everything you have stated is true and complete. You are at least 18 years of age or you are at least 21 years of age if a permanent resident of Puerto Rico. You authorize First Florida Bank (hereinafter "us" or "our") to obtain your credit report(s), employment history and any other information in order to approve or decline this application, service your account, and manage our relationship with you. You consent to our sharing of information about you and your account with the organization, if any, endorsing this credit card program. You authorize us to share with others, to the extent permitted by law, such information and our credit experience with you. In addition, you may as a customer later indicate a preference to exempt your account from some of the information-sharing with other companies ("opt-out"). If you accept or use an account, you do so subject to the terms of this application, the "Details of Rate, Fee and Other Cost Information" and the Credit Card Agreement, as it may be amended; you also agree to pay and/or to be held jointly and severally liable for all charges incurred under such terms. Any changes you make to the terms of this application will have no effect. You also understand that the Annual Percentage Rate you receive will be determined based on your creditworthiness. You understand that only a portion of your Total Credit Line will be available for Bank Cash Advances. You also understand that if you have existing credit card accounts with First Florida Bank, we may utilize

the available credit on the existing account(s) to approve your new credit card. You accept that on a periodic basis your account may be considered for automatic upgrade at our discretion. You consent to and authorize us, any of our affiliates, or our marketing associates to monitor and/or record any of your phone conversations with any of our representatives. If additional development is necessary based on the application information provided, we will make every attempt to contact you.

FOR INTERNAL USE ONLY

ACCOUNT NO. (1)			ACCOUNT NO. (2)		
DATE APPROVED	CREDIT LINE	APPROVED BY	DATE APPROVED	CREDIT LINE	APPROVED BY
NO. CARDS	PRO. CODE		NO. CARDS	PRO. CODE	

FOLD AND SECURE WITH TAPE FOR MAILING

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 First Florida Bank, Destin, FL 32540