

Please fill out all fields below (unless otherwise indicated) using block letters.

You'd prefer correspondence in  English  French

**What does the requesting company want?**

New account  Change to existing account  Credit limit increase

(please specify) \_\_\_\_\_

Your existing PREMIA or Business Card MasterCard account number **5 2 5 8**

Initials \_\_\_\_\_

Would you like a reduced interest rate? Initial here if the requesting company would like a reduced interest rate.<sup>2</sup>  
**Main card:** Additional annual fee of \$15  
**Each additional card:** No additional annual fee

**Overdraft protection**

Yes, automatically charge my company's National Bank MasterCard for the amount needed<sup>3</sup> to cover any bank overdraft of the requesting company.

National Bank account no. \_\_\_\_\_ Transit no. \_\_\_\_\_

**Please select your card**



If neither is selected, National Bank will issue a PREMIA card with the À la carte Rewards Plan.

PREMIA card with À la carte Rewards Plan\* OR  PREMIA card

Main card: annual fee of \$105 Each additional card: annual fee of \$50 \* Annual interest rate: 18.9%

Main card: annual fee of \$45 Each additional card: annual fee of \$25

**How much credit does the requesting company want to apply for?**  
 (minimum \$5,000, maximum \$50,000). The credit limit will be shared among all cards issued to the requesting company.

Credit limit amount applied for by the requesting company  
 \$ \_\_\_\_\_



Business Card\*  
 No annual fee  
 \* Annual interest rate: 19.9%

**How much credit does the requesting company want to apply for?**  
 (minimum \$1,000, maximum \$50,000). The credit limit will be shared among all cards issued to the requesting company.

Credit limit amount applied for by the requesting company  
 \$ \_\_\_\_\_

**1. Information about the requesting company**

Sole proprietorship  Partnership  Corporation  NPO: CRA No.: \_\_\_\_\_ If your organization is not a charitable organization registered with the Canada Revenue Agency (CRA), does it solicit charitable financial donations from the public?  Yes  No  Other: \_\_\_\_\_

Business name to appear on the card (Maximum of 21 characters, including spaces) \_\_\_\_\_

Legal name of the requesting company as it appears on its charter or declaration of registration \_\_\_\_\_ Business operating since (mm/dd/yyyy) \_\_\_\_\_

Address (number and street name) \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal code \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_ Nature of the requesting company's activities \_\_\_\_\_ Detailed nature of operations \_\_\_\_\_

Annual sales \$ \_\_\_\_\_ Number of employees \_\_\_\_\_ Main financial institution of the requesting company \_\_\_\_\_

Address (number and street name) \_\_\_\_\_ Account number \_\_\_\_\_ Is the requesting company a shareholder of an affiliated business?  Yes  No

**2. Information about the authorized signatory**

If more than one authorized signatory is liable for the credit limit requested, each authorized signatory must complete a separate application and complete sections 1 (name of requesting company only), 2 and 5. Please return the applications in the same envelope.

Mr. Last name \_\_\_\_\_ First name \_\_\_\_\_ Date of birth (mm/dd/yyyy) \_\_\_\_\_ Social Insurance Number\* (optional) \_\_\_\_\_

Mrs. \_\_\_\_\_

Personal address (number and street name) \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal code \_\_\_\_\_

How long at this address?  
 Years \_\_\_\_\_ Months \_\_\_\_\_  Owner  Tenant  Other \_\_\_\_\_ Mother's maiden name (for identification and security purposes) \_\_\_\_\_ Home telephone number ( ) \_\_\_\_\_

Previous personal address if less than 2 years (number and street name) \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal code \_\_\_\_\_

Personal gross monthly revenue drawn from business \$ \_\_\_\_\_ Personal net worth (assets minus liabilities) \$ \_\_\_\_\_ Are you the owner of the company? Yes  No  Since (mm/dd/yyyy) \_\_\_\_\_ Percentage of the business owned by you \_\_\_\_\_ %

Are you personally liable for a debt incurred with a third party?  No  Yes If yes  Personal  Business Amount \$ \_\_\_\_\_ Creditor's name \_\_\_\_\_

Name of current employer, if applicable \_\_\_\_\_ Since (mm/dd/yyyy) \_\_\_\_\_ Occupation \_\_\_\_\_ Total gross monthly income \$ \_\_\_\_\_ Name of previous employer if less than 2 years \_\_\_\_\_ Occupation \_\_\_\_\_

**3. Request for additional cards**

**NOTICE:** Be advised that, in completing this application, the additional cardholder will be asked to provide sensitive personal information. This information may be seen by other cardholders and by the authorized signatory for this application. If you prefer, you can fill out one application per cardholder and send them all in the same envelope, ensuring that all authorized signatories have signed the application forms. If the requesting company wants more than 2 additional cards (up to 9 cards allowed), please use the additional application forms and complete sections 1 (name of requesting company only), 3 and 5. Please return all applications in the same envelope.

Mr. Last name \_\_\_\_\_ First name \_\_\_\_\_ Date of birth (mm/dd/yyyy) \_\_\_\_\_

Mrs. \_\_\_\_\_

Personal address (number and street name) \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal code \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Mother's maiden name (for identification and security purposes) \_\_\_\_\_ Maximum monthly expenses (optional) \$ \_\_\_\_\_

Access to cash advances  Yes  No Cardholder's signature (please review terms and conditions on the following page before signing)

Mr. Last name \_\_\_\_\_ First name \_\_\_\_\_ Date of birth (mm/dd/yyyy) \_\_\_\_\_

Mrs. \_\_\_\_\_

Personal address (number and street name) \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal code \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Mother's maiden name (for identification and security purposes) \_\_\_\_\_ Maximum monthly expenses (optional) \$ \_\_\_\_\_

Access to cash advances  Yes  No Cardholder's signature (please review terms and conditions on the following page before signing)

**4. Balance transfer request**

Use this section to transfer the balance from another credit card to your new PREMIA or Business Card account.

**YES! Please transfer the balance of the account listed below to the National Bank MasterCard credit card of the requesting company.**<sup>5</sup> ▶ Transfer amount \$ \_\_\_\_\_

Name of financial institution or credit card company \_\_\_\_\_ Card number \_\_\_\_\_ Signature of authorized signatory

**5. Important • Mandatory Signature**

**Please read the terms and conditions on the following page and sign below.** By signing below, the undersigned, in his personal capacity and in his capacity as the authorized representative of the requesting company, agrees to be bound by the terms of the Agreement and warrants that the representations made in this application are true and correct. The undersigned understands that by signing this application, he is also providing his consent and authorization concerning his personal information, effective as of this date and during the entire time he remains a client of the Bank, and for any other period as stipulated by law, even if he is no longer a client of the Bank. The undersigned also acknowledges that he has been informed of his right to restrict the collection, use and communication of his personal information. **Finally, the Company and the authorized signatory specifically authorize the Bank to obtain from time to time their credit records from credit reporting and assessment agencies and acknowledge being duly advised with regards to this.** The requesting company and all authorized signatories who submit a request to open the MasterCard account mentioned herein are jointly and severally (solidarily in Quebec) liable for all debts incurred from the use of the account.

Name of the company's authorized signatory in their capacity as authorized and on their own behalf (in block letters) \_\_\_\_\_ Signature of the company's authorized signatory in their capacity as authorized and on their own behalf  Date (mm/dd/yyyy) \_\_\_\_\_

**For administrative use only**

CIS no. \_\_\_\_\_ I-COP no. \_\_\_\_\_

Employee's name (in block letters) \_\_\_\_\_ Employee no. \_\_\_\_\_ Transit \_\_\_\_\_ Employee's signature

Please forward the completed application to Electronic Payment Solutions Service, transit: 1569-1.

1. All credit applications are subject to credit approval by National Bank.  
 2. The granting of the reduced rate is subject to credit approval by National Bank. The reduced rate currently offered is 8.9% on balance transfers and cash advances, and 13.9% on purchases.  
 3. An advance to cover an overdraft will be rounded to the next highest hundred dollars (\$100). The fees that will be charged by the Bank are listed in the "Guide to Business Banking Fees."  
 4. Disclosure of your Social Insurance Number is optional. For information on its use by National Bank, read the section entitled "Collection, Use and Communication of Financial and Personal Information" on the following page.  
 5. Balance transfers can reach up to 75% of the credit limit granted to the requesting company. National Bank reserves the right to refuse any balance transfer. Unless the reduced rate is chosen, all balance transfers and cash advances will be subject to the regular annual interest rate in effect, which is currently 18.9% for the PREMIA Business card and 19.9% for the Business Card.



## GENERAL CONDITIONS

For the purposes of this application, the term “Bank” designates National Bank of Canada, its successors and assigns, and all its subsidiaries offering to the public in Canada deposit and lending services, credit, debit or payment cards, and trust, custodial, brokerage, insurance and other personal financial services, in particular National Bank Trust Inc., National Bank Securities Inc. and Natcan Trust Company, some of which may be subject to specific legislation. A list of the main Canadian subsidiaries may be obtained at the branch.

The applicant company (the “Company”) certifies that the information provided in this application form is complete and accurate and seeks to open a MasterCard PREMIA Business Card or MasterCard Business Card account (the “Account”) as well as be issued cards as stated in this application form, which cards may be renewed or replaced by the Bank from time to time by the Bank, as well as the terms and conditions of any and all contracts regarding the services that may be obtained with the Account. It is agreed that the Company's first use of the Account shall confirm the receipt and acceptance of the terms and conditions governing the use of the Account as well as the acceptance of the terms and conditions related to the services which may be obtained using the card.

The Company requests that the Account be opened for the purpose of being used exclusively for its business activities.

The Company agrees to grant to the person(s) identified on this application as the authorized signatory(ies), all the rights and powers associated with the management of the Account.

The Company, the authorized signatories and each holder of the Card undertake to respect the terms and conditions governing the use of the Account which may be modified from time to time by the Bank, as well as the terms and conditions of any and all contracts regarding the services that may be obtained with the Account. It is agreed that the Company's first use of the Account shall confirm the receipt and acceptance of the terms and conditions governing the use of the Account as well as the acceptance of the terms and conditions related to the services which may be obtained using the card.

At the request of the Bank, the Company shall provide its financial statements, as well as any other document considered relevant and necessary by the Bank, for the purpose of evaluating this application and any renewal of the Card.

The Company and all authorized signatories that sign an application form to open the Account shall be jointly and severally (solidarily in Quebec) liable to the Bank for any and all obligations and indebtedness of principal, interest and charges incurred directly or indirectly through the use of the Account.

The Company and authorized signatories indemnify and hold the Bank harmless against any damage resulting from exceeding the monthly spending limit or a holder's accessing cash advances and undertake to pay any balance due, even if such actions are not authorized by the Company or if control measures implemented by the Company or the Bank exist.

It is understood that the holders of the additional Cards issued under this application shall not be personally liable for the indebtedness arising from the use of the Account.

In the event that this application does not meet the conditions specified by the Bank, the Bank reserves the right to refuse to open the Account and/or issue the Card at any time and at its sole discretion.

The terms and conditions of this application have been formally and validly adopted by a resolution of the Board of Directors of the Company, in accordance with its incorporating instrument, bylaws and applicable statutes and legislation. Said resolution was still in full force and effect when the authorized signatories of the Company signed this application and these representatives were and are duly authorized to represent the Company for the purposes hereof as they have so declared.

**The Company and the authorized signatories understand that they may obtain additional information with respect to the requested Card by calling 1-800-363-3339 (toll free) or 514-394-1410 in the Montreal area.**

If applicable, it is agreed that the annual fees shall appear on the first statement following the issue of the Card, and once a year thereafter.

### COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION

#### Collection of information

The Bank collects private and personal information on the Company, the authorized signatories, and holders (hereinafter indiscriminately, for the sole purposes of this section, the “Information”) in order to offer the Company the regular financial services related to the issue, management, renewal, and replacement of the Card and to insurance products related to the Card (where Legislation permits), by any technological or electronic means, or via telephone, to understand and meet the Company's needs, to determine its eligibility for various Bank products and services and, generally, to protect its interests and those of the Bank.

The holders agree to provide the Bank with the necessary information about themselves for the purposes indicated herein. The Company and the authorized signatories agree to provide the Bank with the information about themselves required for the purposes mentioned herein and authorize the Bank to obtain financial and personal information about them from any person or entity likely to have such information and confirm the accuracy of such information (credit reporting and assessment agencies, financial institutions, public registries, regulatory authorities and organizations, employers, professionals, persons with whom they have a business relationship and Bank subsidiaries and affiliated companies).

#### Use and disclosure of information

- The information that the Bank collects and needs in order to provide the products and services requested may be used and disclosed to the persons and entities mentioned in the previous paragraph, to any person or entity working with or for the Bank, including its suppliers, attorneys or agents, as well as any other third party, as permitted by law, for the following purposes:
  - To evaluate the financial position of the Company and authorized signatories and to determine the Company's eligibility for the various products and services requested, including the benefits, programs and services tied to the use of the Card if applicable, as well as to verify the authenticity of the information provided;
  - To continuously provide the Company with the products and services requested;
  - To process and store data, recover amounts and inspect, audit and investigate transactions paid for with the Card;
  - To protect the Company and authorized signatories as well as the Bank against errors and fraud, thereby authorizing the Bank to monitor transactions carried out with the Card and exchange information on the Company, authorized signatories and holders with merchants with whom the Card has been used for remote transactions, as needed.
  - To enable the Bank to compile data for statistical purposes, to assess the quality of its customer service and, in general, to conduct its activities and ensure their compliance, thereby authorizing the Bank to record and monitor telephone conversations and other exchanges with holders, authorized signatories and any representative, manager, administrator or employee of the Company (e-mail, Internet, etc.);
  - To enable the Bank to adopt measures required and exchange with its subsidiaries and affiliated companies the information necessary to manage risk and update the profile of the Company and authorized signatories, as well as to comply with applicable legislation, particularly the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act*;

- To make it easier for the Bank, credit reporting and assessment agencies, financial institutions, public registries, regulatory authorities and agencies, employers, professionals, persons with whom the Company and its authorized signatories do business, Bank subsidiaries and affiliated companies to identify the Company and authorized signatories and differentiate them from their other clients. The authorized signatories authorize the Bank to use their social insurance number for these specific purposes, unless they refused to disclose it when completing this application;
- To enable interested persons or companies to carry out due diligence audits in the event of the sale, disposal or transfer of the Bank's activities or assets or to allow the conclusion of any transaction in this regard;
- To convey the credit files of the Company and its authorized signatories to credit reporting and assessment agencies, credit product insurers or other lenders in order to preserve the integrity of the credit granting process, as applicable; and
- In other cases and under conditions where legislation authorizes the Bank to use and exchange information without the consent of the Company, authorized signatories and holders.
  - Some of the identity and financial information of the Company and authorized signatories may also be used and disclosed for the following purposes:
    - To offer the Company, by way of telemarketing or other means, other products and services provided by the Bank, its subsidiaries, affiliated companies and select business partners\*, who are well established businesses chosen by the Bank. Such information shall also be added to the client lists drawn up and used by the Bank for this purpose; and
    - To allow the Bank to disclose it, as permitted by law, to its subsidiaries and affiliated companies, attorneys or agents as well as its select business partners so that they may offer the Company, by telemarketing or other means, products and services which may be of interest to them.

### Retention, access and correction

The Bank will keep the information collected for the purposes set out herein for as long as it may be needed and/or any other period prescribed or permitted by law, even if the Company, its authorized signatories and holders no longer do business with the Bank.

The Company, its authorized signatories and holders can access their personal information and have it corrected, if needed, by sending a written request to their branch or by e-mailing [confidentiality@nbc.ca](mailto:confidentiality@nbc.ca).

Furthermore, the Company, its authorized signatories and holders undertake to advise the Bank promptly of any changes related to their personal information so that it may update their file(s). The Bank will be authorized to act on the information that it holds pertaining to the Company, its authorized signatories and holders until it is advised of any such changes. If they fail to advise the Bank of such changes, they cannot hold the Bank liable for any damages they incur as a result of inaccurate information the Bank has about them.

The Company, its authorized signatories and holders may obtain more information on the Bank's privacy policy by visiting its website at [www.nbc.ca](http://www.nbc.ca) or referring to the pamphlet on this policy available in branches.

\* The Company can consult a list of the Bank's select business partners by visiting [www.nbc.ca](http://www.nbc.ca) or calling toll-free 1-800-363-3339.

### ADDITIONAL INFORMATION

**Grace period:** No interest will be charged on purchases made during the month provided the Company pays the balance of its Account in full within twenty-one (21) days of the statement date. This grace period does not apply to cash advances and balance transfers. **Minimum payment:** The minimum payment to be made to the Bank every period is equal to 3% of the unpaid balance indicated in the account statement or a minimum of \$50, whichever amount is higher (or the new unpaid balance if it is lower than \$50). **Statement:** A statement of account is sent on a monthly basis.

Example of credit charges calculated over a period of thirty (30) days:

	Annual interest rate	Average balance	
		\$500	\$3,000
<b>PREMIA MasterCard Business Card</b>	<b>18.9%</b>	\$7.88	\$47.25
<b>MasterCard BusinessCard</b>	<b>19.9%</b>	\$8.29	\$49.75

### NON-INTEREST CHARGES

The Company agrees that the following fees will be charged to its Account, if applicable. The Bank reserves the right to modify the amount of these fees after advising the Company within a reasonable time.

Additional copy of sales slip:	\$5.00 (1)
Additional copy of statement of account:	\$5.00 (1)
Cheque issued for a credit balance:	\$5.00
Fees for dishonoured MasterCard Account payments:	\$40.00
Conversion fee for transactions in a foreign currency:	2.5% (2)
Fees for cash advances:	
- National Bank ATMs:	\$2.00
- National Bank branches (tellers):	\$2.50
- Other financial institutions in Canada (tellers* and Interac ** ATMs):	\$2.50
- Other financial institutions outside Canada (tellers* and CIRRUS** ATMs):	\$5.00

\* At a financial institution that is a member of the MasterCard Network.

\*\* Trademark of Interac Inc., MasterCard International Inc. and CIRRUS System Inc. Authorized user: National Bank of Canada.

(1) No fee will be charged for a transaction carried out within thirty (30) days of the date the statement of account is issued.

(2) Conversion fees for transactions in a foreign currency correspond to 2.5% above the exchange rate in effect on the date the transaction is posted to the MasterCard Account.