

# HAWAII NATIONAL BANK

BUSINESS DEBIT CARD APPLICATION

BANK USE ONLY	APPROVED BY	IDN	DATE
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<b>REQUEST FOR</b>	<input type="checkbox"/> New Business Debit Card	<input type="checkbox"/> Additional Business Debit Card(s)
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<b>BUSINESS INFORMATION</b>			
BUSINESS LEGAL NAME		FEDERAL TAX ID	
BUSINESS ADDRESS	CITY	STATE	ZIP
MAILING ADDRESS (IF DIFFERENT)	CITY	STATE	ZIP
LEGAL STRUCTURE			E-MAIL
<input type="checkbox"/> Corporation <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Company			YEARS IN BUSINESS
<input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other: _____			
TYPE OF BUSINESS (contractor, restaurant, hair salon, etc.)	BUSINESS CHECKING ACCOUNT NUMBER		AVERAGE BALANCE

<b>INFORMATION ON CORPORATE PRINCIPAL</b>			
NAME (FIRST, MIDDLE, LAST)	SOCIAL SECURITY NUMBER	DATE OF BIRTH	PHONE NUMBER
HOME ADDRESS	CITY	STATE	ZIP
YOU MUST BE ONE OF THE FOLLOWING: (check one)		% OF OWNERSHIP	E-MAIL
<input type="checkbox"/> President <input type="checkbox"/> Owner <input type="checkbox"/> Partner <input type="checkbox"/> Other: _____			

CARDS TO BE ISSUED TO		SPENDING TIER OPTION
NAME (FIRST, MIDDLE, LAST)	SOCIAL SECURITY NUMBER	DATE OF BIRTH
----- SIGNATURE		
NAME	SOCIAL SECURITY NUMBER	DATE OF BIRTH
----- SIGNATURE		
NAME	SOCIAL SECURITY NUMBER	DATE OF BIRTH
----- SIGNATURE		

SPENDING TIER OPTIONS (SELECT ONE OPTION):

Tier No. 1: \$5,000 Daily Point-of-Sale (POS) Purchases and \$1,600 ATM Transactions.

Tier No. 2: \$2,500 Daily Point-of-Sale Purchases and No ATM Transactions.

Tier No. 3: \$500 Daily Point-of-Sale Purchases and No ATM Transactions.

**(IMPORTANT: Allowing ATM usage will give authorized users access to checking account information. POS Purchases includes purchasing goods and/or services both in person or remotely. Authorized users may also get cash back from a merchant and/or financial institution, if the merchant and/or financial institution permits. Hawaii National Bank is unable to restrict "cash back" on POS purchases as that feature is controlled by the merchant and/or financial institution.)**

**PLEASE READ AND SIGN:** By signing below, you are asking on behalf of the company identified above (the "Company"), Hawaii National Bank to issue a Business Debit Card(s) to the individuals listed above (the "Card"). By signing below, you represent that you are authorized to sign this application on behalf of the Company pursuant to the attached authorization, and that all the above information is true and correct. You also authorize the Bank to verify the information you have given above and to receive and exchange credit information about the Company and any principal owner(s) of the Company by any means, including but not limited to by use of consumer credit reports, both now and in the future. You understand and agree that, if this application is approved by the Bank, the cardholders listed above will only have access to the -Company's business checking account ("the Account") by use of the Card(s), and that the Bank shall not be required to pay checks and other items drawn on the Account signed by those cardholders unless those cardholders have signed the signature card for the Account. You agree that the Company will be liable for all fees and charges charged to the Account described in the Business Debit Card Agreement (the "Agreement"). We will send you the Agreement with the Card(s) or in a separate mailing before we send you the Card(s). By signing below and using the Card(s), you agree that all Cards will be used solely for business purposes and that you agree to all of the terms of the Agreement, including the provision on binding arbitration without a judge or jury. By signing below, you also acknowledge and agree that you are granting us a Uniform Commercial Code security interest in the Account and any other deposit accounts you maintain with us to secure payments initiated with the Cards and any current or future indebtedness to us.

SOLE PROPRIETORSHIPS MUST COMPLETE AND SIGN BELOW ALL OTHER APPLICANTS MUST COMPLETE, SIGN BELOW AND ALSO EXECUTE RESOLUTIONS ON REVERSE SIDE

\_\_\_\_\_  
 AUTHORIZED SIGNATURE TITLE DATE AUTHORIZED SIGNATURE TITLE DATE

# HAWAII NATIONAL BANK

BUSINESS DEBIT CARD APPLICATION

## RESOLUTIONS (Corporation, Unincorporated Organization or Limited Liability Company)

To: Hawaii National Bank

DATE

I hereby certify to HAWAII NATIONAL BANK (the "Bank") that the following is a true copy of resolutions duly adopted by the \_\_\_\_\_ of \_\_\_\_\_, a \_\_\_\_\_ (the "Company"), either: (i) at a meeting duly held at which a quorum was present and voting, or (ii) by written consent without a meeting of all directors, persons, or members, as applicable, as authorized by law, the organizational documents or the operating agreement of the Company, that the resolutions have been duly entered in the book of minutes of the Company, and that the resolutions are in conformity with the Articles of Incorporation and By-Laws, organizational document or operating agreement of the Company and the laws of the jurisdiction of its formation, if applicable, and are now in full force and effect:

"RESOLVED, that the person or persons executing the attached Business Debit Card Application (the "Application") are current officers, managers or members of the Company and are hereby authorized to execute the Application and that each of the persons listed in the Application are current officers, managers, members or employees of the Company and is authorized in the name of the Company and as its act and deed, from time to time, to make purchases and obtain cash advances on behalf of the Company from the Company's business checking account (the "Checking Account") identified in the Application or by a separate authorization notice in the future."

"FURTHER RESOLVED, that the undersigned is authorized and directed to certify to the Bank the adoption of these Resolutions, and the name(s) and title(s) and specimen signature(s) of the present officer(s), manager(s), member(s) or employee(s) of the Company contained in the Application, and from time to time as changes in such personnel are made, to certify immediately such changes to the Bank, and the name(s) and title(s) and specimen signature(s) of the new personnel."

"FURTHER RESOLVED, that any and all actions heretofore taken by an officer(s), manager(s), member(s) or employee(s) of the Company in connection with or relating to the Application and the Checking Account be and they are hereby ratified and confirmed as the proper and binding actions of the Company, and terms of the Application and the Business Debit Card Agreement, referred to in the Application, are approved and authorized and are binding upon the Company."

I further certify that the name(s) and specimen signature(s) contained in the Agreement/Signatures Section of the Application are the name(s) and specimen signature(s) of present officer(s), manager(s), member(s) or employee(s) of the Company or other persons referred to in these Resolutions.

CORPORATE SEAL IF APPLICABLE

By: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

## PARTNERSHIP AUTHORIZATION

To: Hawaii National Bank

DATE

The undersigned (collectively, the "Partners") hereby certify to HAWAII NATIONAL BANK (the "Bank") as follows: (1) The Partners are all of the general partners (for a limited or general partnership) or partners (for a limited liability partnership) of \_\_\_\_\_, a \_\_\_\_\_ (the "Partnership"); (2) The person or persons executing the attached Business Debit Card Application (the "Application") is/are hereby authorized to execute the Application; and (3) Each of the persons listed in the "Cards To Be Issued To" Section of the Application is authorized, in the name of or on behalf of the Partnership, from time to time, to make purchases and obtain cash advances by use of Business Debit Cards (the "Cards") from the Company's business checking account (the "Checking Account") identified in the Application, and that the specimen signatures of the persons listed in the Application are the specimen signatures of those persons. Any and all actions heretofore taken by any person in connection with or relating to any and all transactions related to the Application and the Checking Account are hereby ratified and confirmed as the proper and binding actions of the Partnership. To the extent permitted by law, the Partners are jointly and severally liable for all transactions, indebtedness and obligations heretofore or hereafter incurred or created in the name of the Partnership, and the terms of the Application and the Business Debit Card Agreement, referred to in the Application, are binding upon the Partnership and the Partners.

\_\_\_\_\_  
PARTNER

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DATE

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PARTNER

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