

# MARINE BANK

marinebank.com

Introducing FlashPoint BusinessCard™  
your money. your way.

Community banking,  
the way it used to be.

## FlashPoint BusinessCard™ Application (continued)

### CARDHOLDER INFORMATION

First Name Middle Initial Last Name

Job Title

Residence Address

Residence City Residence State Residence Zip

Birth Date Social Security Number

Mother's Maiden Name

Home Phone Number

Driver's License Number or State ID State of Issuance

I state that the information provided in this application is accurate as of the date it is submitted. I further state that I have full authority to act on behalf of the business listed above, and that I am authorized to apply for the products and services indicated on this form.

Cardholder's Signature Date

Authorized Account Holder's Signature Date

Fax your application to:  
317.542.5710

Lost or Stolen cards-report to:  
800.523.4175

Mail your application to:  
Marine Bank  
Electronic Banking Department  
5435 N. Emerson Way  
Indianapolis, IN 46226

To change your PIN call:  
PIN NOW 866.985.2273

An application is required for each cardholder.

# flashpoint



debit not debt  
hassle-free "checking"  
easy and economical  
worldwide access  
ATM compatible

# MARINE BANK

Marine Bank FlashPoint BusinessCard™ services are available only to Marine Bank business checking account holders. To open a business checking account, visit any Marine Bank location.

## FlashPoint BusinessCard™ Application

### PLEASE READ BEFORE SIGNING

I (we) authorize Marine Bank to verify or obtain further information Marine Bank may deem necessary concerning my (our) credit history. I (we) authorize Marine Bank to make whatever credit and/or investigative inquiries deemed necessary in connection with this application and to exchange information with others regarding my (our) card transactions. I (we) understand that a Marine Bank FlashPoint BusinessCard™ is not a credit card, and that no commitment to extend credit to me (us) will be made by the issuance of the Marine Bank FlashPoint BusinessCard™(s) requested.

The Customer hereby requests Marine Bank issue a FlashPoint BusinessCard (the "Card") to the cardholder named herein. It is understood that the individual listed on this application, whether or not such individual is named as a signer on the designated account(s) identified above, will be granted access to funds in the designated account(s) in accordance with the terms and conditions of this application, and the applicable deposit account agreement(s) and disclosure(s) [collectively, the "Agreements"]. It is understood that the cardholder may be able to make purchases, receive cash advances, withdraw money from ATMs, determine the balance in the designated account(s), and transfer funds among designated account(s). Upon signing this application, the Customer assumes full responsibility and will be liable for and agrees that the Bank may charge the account(s) for the amount of each transaction in which the Card is used, whether or not use is expressly authorized and whether or not there are sufficient funds in the account(s). It is understood that by using the Card the Customer accepts the terms and conditions of the Agreements.

Once you receive your Marine Bank FlashPoint BusinessCard™, it may be activated by placing a call from your home to the toll free number listed on the front of the card. Approximately three (3) days following the receipt of your card, you will receive your PIN (Personal Identification Number) in a separate mailer. This PIN permits use of the card for the purpose of initiating electronic fund transfers to and from account(s) through automated teller machines, point-of-sale terminals and other electronic facilities that may be made available from time to time.

CIF# \_\_\_\_\_

Bank Use

### CUSTOMER INFORMATION

Legal Name of Customer

Doing Business As (DBA) if applicable

SSN or TIN/EIN (Sole Proprietorship provided SSN or EIN)

Tax ID

PRIMARY MAILING ADDRESS (P.O. Boxes and Addresses Outside of the U.S. Will Not Be Accepted)

Street Address

City

State

Zip Code

BUSINESS MAILING ADDRESS  same as above  address entered below

Street Address

City

State

Zip Code

Business Telephone Number

Business Fax Number

Website Address

Account to be Associated With FlashPoint Card

(continued on back)

Application



## Business Electronic Funds Transfers Disclosure

### **BUSINESS ELECTRONIC FUNDS TRANSFERS - YOUR RIGHTS AND RESPONSIBILITIES**

The electronic fund transfers we are capable of handling for businesses are indicated below, some of which may or may not apply to your account and may or may not be available at all terminals. Please read this disclosure carefully because it tells you your rights and obligations for these transactions. You should keep this notice for future reference.

### **CUSTOMER'S AGREEMENT**

The Customer agrees to the following terms and conditions: I (we) authorize CIBM Bank to verify or obtain further information CIBM Bank may deem necessary concerning my (our) credit history. I (we) authorize CIBM Bank to make whatever credit and/or investigative inquiries deemed necessary in connection with this agreement and to exchange information with others regarding my (our) card transactions. I (we) understand that a CIBM Bank FlashPoint BusinessCard™ (the "Card") is not a credit card, and that no commitment to extend credit to me (us) will be made by the issuance of a Card.

The Customer has requested that CIBM Bank issue a Card to the Cardholder. It is understood that the possessor of a Card may access account proceeds as described in the FlashPoint BusinessCard™ Application, the terms of which are incorporated herein.

### **CUSTOMER'S LIABILITY**

The Customer assumes full responsibility and will be liable for and agrees that the Bank may charge the account(s) for the amount of each transaction in which the Card is used, whether or not use is expressly authorized and whether or not there are sufficient funds in the account(s). It is understood that by applying for a Card the Customer accepts the terms and conditions of the FlashPoint BusinessCard™ Application and the applicable deposit account agreement(s) and disclosure(s) (collectively, the "Agreements").

Once you receive your Card, it may be activated by placing a call from your business phone to the toll free number listed on the front of the Card. Approximately three (3) days following the receipt of your Card, you will receive your PIN (Personal Identification Number) in a separate mailer. This PIN permits use of the Card for the purpose of initiating electronic funds transfers to and from account(s) through automated teller machines, point-of-sale terminals and other electronic facilities that may be made available from time to time.

The Customer agrees to establish and maintain reasonable procedures to ensure the confidentiality of the PIN and will notify the Bank immediately upon learning that any PIN has become known by any person other than the Cardholder, upon removal of the Cardholder as an authorized signer on the account, or upon the termination of the employment of Cardholder by the Customer. If the Bank is given a reasonable opportunity to act upon such notice to prevent any unauthorized use of the Card, the Customer will agree to hold the Bank harmless for all expenses, costs or other liability incurred by the Bank.

### **ATM Transfers**

You may access your account(s) by ATM using your Card and PIN to:

- Make deposits to checking accounts
- Get cash withdrawals from checking accounts you may withdraw no more than \$300.00 per day
- Get checking account(s) information
- Cash withdrawals are contingent upon sufficient funds being available

### **Point-Of-Sale Transactions**

Using your Card: You may access your checking account to purchase goods, in person, by phone, by computer, pay for services in person, by phone, by computer, get cash from a merchant, if the merchant permits, or from a participating financial institution, and do anything you can do with a credit card.

You may not exceed more than \$1,000.00 in transactions per day. Cardholder not present transactions limited to \$700 per day.

### **Computer Transfers**

You may access your account(s) via internet connection by visiting [www.cibbank.com](http://www.cibbank.com) and using your account number(s), User ID, and PIN. To obtain a User ID and PIN for online access to your account(s), please visit a branch or go to [www.centralillinoisbank.com](http://www.centralillinoisbank.com). Upon accessing your account(s) online, you may:

- Transfer funds from checking to savings
- Transfer funds from savings to checking



- Transfer funds from checking, savings, money market to checking, savings or money market
- Transfer funds from line of credit to checking or savings
- Make payments from savings to loan accounts with us
- Make payments from checking to loan accounts with us
- Make payments from checking to payee via online bill pay
- Get checking account(s) information
- Get savings account(s) information
- Get Time Deposit and Loan Information

### **GENERAL LIMITATIONS**

In addition to those limitations on transfers elsewhere described, if any, the following apply:

Transfers from a Savings or Money Market Deposit account to another account or to third parties by preauthorized, automatic, or telephone transfer are limited to six per month with no more than six transfers by check or POS or similar order to third parties. If you exceed the transfer limitations set forth above in any statement period, your account will be subject to closure by the bank.

Savings accounts are allowed zero transfers by checks. Money Market transfers are based on the accounts monthly statement cycle.

### **FEES**

**ATM Operator/Network Fees:** When you use an ATM not owned by us, you may be charged a fee by the ATM operator or any network used (and you may be charged a fee for a balance inquiry even if you do not complete a fund transfer).

### **PREAUTHORIZED PAYMENTS**

#### **Right To Stop Payment And Procedure For Doing So:**

If you have told us in advance to make regular payments out of your account, you can stop any of these payments. Here's how: Call or write us at the telephone number or address listed in this disclosure, in time for us to receive your request 3 business days or more before the payment is scheduled to be made. If you call, we may also require you to put your request in writing and get it to us within 14 days after you call. We charge \$15.00 for each stop payment.

#### **Liability For Failure To Stop Payment For Preauthorized Transfer**

If you order us to stop a payment 3 or more business days before the transfer is scheduled to occur, and we do not do so, we will be liable for your losses or damages.

### **FINANCIAL INSTITUTION'S LIABILITY**

#### **Liability For Failure To Make Transfers:**

If we do not complete a transfer to or from your account on time or in the correct amount according to our agreement with you, we will be liable for your losses or damages. However, there are some exceptions. In addition to those exceptions listed in the Agreements, we will not be liable:

- If, through no fault of ours, you do not have enough money in your account to make the transfer.
- If the transfer would go over the credit limit on your overdraft line.
- If the automated teller machine where you are making the transfer does not have enough cash.
- If the terminal or system was not working properly and you knew about the breakdown when you started the transfer.
- If circumstances beyond our control (such as fire or flood) prevent the transfer, despite reasonable precautions that we have taken.

### **CONFIDENTIALITY**

We will disclose information to third parties about your account or the transfers you make:

- Where it is necessary for completing transfers; or
- In order to verify the existence and condition of your account for a third party, such as a credit bureau or merchant; or
- In order to comply with government agency or court orders; or
- If you give us written permission.
- As explained in the separate Privacy Disclosure.

For problem resolution call or write: 877.925.3030, CIBM Bank, Electronic Banking Services Department, PO Box 6116, Champaign IL 61826-6116

Our business days are Monday through Friday – Federal holidays not included.