



Commercial Online Deposit QuickApp Instructions

Please use the *QuickApp for Commercial Online Deposit* to apply for DCU's *Business Online Deposit* when:

- Your business has been in business for at least 2 years, and
 - You are interested in depositing checks remotely
1. Go to Online Banking and read and accept the *Business Online Deposit Agreement*.
 2. Please fill out the entire *QuickApp for Business Online Deposit*.
 3. Include your latest business Tax Return or Fiscal Statement (you may be required to provide additional information for underwriting purposes).
 4. Send your form to DCU for processing by one of the following ways:
 - a. Fax the completed application and business statement to DCU Commercial Lending Department at 866.733.8009, or
 - b. Bring your completed form to any DCU branch office or
 - c. Mail your completed form to:

**Digital Federal Credit Union
Commercial Lending Department
220 Donald Lynch Blvd
PO Box 9130
Marlborough, MA 01752-9130**

(If you do not meet these requirements and would like further information regarding Business Online Deposit call 800.328.8797 extension 9188.)

What you can expect

A Credit Union Representative will contact you within one business day after we receive your application to discuss your request. Most decisions will be made within four business days of receiving a complete application. DCU will attempt to make the decision on the forms you have supplied; however, it is possible that additional information may be required.

Business Day and Deposit Availability: Business days are Monday through Friday, except Holidays. Business hours of Online Deposit are 8:00 a.m. to 5:00 p.m., Eastern Time. Checks submitted and approved for deposit prior to the end of our business day will be deposited to your account on the same day. Deposits submitted after the end of our business day, will be deposited on the next business day.

NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against 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 Protect Act. The federal agency that administers compliance with this law concerning this creditor is the National Credit Union Administration, Office of Consumer Protection, 1775 Duke Street, Alexandria, VA 22314

PLEASE RETAIN THESE DISCLOSURES AND A COPY OF YOUR APPLICATION FOR YOUR RECORDS.



BANKING – THE DCU WAY

Digital Federal Credit Union • 220 Donald Lynch Blvd • PO Box 9130 • Marlborough, MA 01752-9130
508.263.6700 • 800.328.8797 • dcu.org • comdeposit.com

QuickApp for Commercial Online Deposit

PLEASE COPY THIS APPLICATION AND RETAIN COPY FOR YOUR RECORDS.

Date: _____

Business Name and Contact Information

Borrower's Legal Name:		DBA (if applicable):
DCU Member Number:	Key Contact Person:	Phone:
Tax ID Number:	Email:	Fax:
Mailing Address: Street:	City:	State: Zip:

Deposit Information

Average Single Deposit Size (Checks only)	\$ _____	Maximum Single Deposit Size (Checks only)	\$ _____
Average Amount of Deposits per month (Checks only)	\$ _____	Maximum Amount of Deposits per month (Checks only)	\$ _____

Business Information

Type of Organization: (Check ONLY one)	<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Partnership
	<input type="checkbox"/> S Corporation	<input type="checkbox"/> General Partnership	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Other
Year Business Established:	Present Management Since:	Number of Employees: FT _____ PT _____		
Type of Business:	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Wholesale	<input type="checkbox"/> Retail	<input type="checkbox"/> Service <input type="checkbox"/> Other _____
What Products or Services do you supply?				
What is the Business' Gross Annual Income? \$ _____				

Business Loans:

Financial Institution	Type	Balance	Monthly Payment	Security
		\$	\$	
		\$	\$	
		\$	\$	

Owner's Personal Financial Information – CONFIDENTIAL

Each owner who owns 20% or more of the business is required to guarantee any obligations of the applicant. Each owner who owns 20% or more must complete this personal information section.

Business Owner:	% Of Company Owned _____%	2nd Business Owner:	% Of Company Owned _____%
Residential Address:		Residential Address:	
City:	State: Zip:	City:	State: Zip:
Date of Birth:	SSN:	Date of Birth:	SSN:
DCU Member # (if any):		DCU Member # (if any):	
Income from Applicant Business	\$	Income from Applicant Business	\$
*Other (includes Rental Income, Interest, Dividends) \$		*Other (includes Rental Income, Interest, Dividends) \$	
Total	\$	Total	\$
Estimated Net Worth	\$	Estimated Net Worth	\$

*Alimony, child support, or separate maintenance payments need not be disclosed unless relied upon as a basis for extension of credit. If disclosed, payments received under court order written agreement oral understanding.

If you are requesting higher limits than \$5,000 daily and \$20,000 monthly please attach Latest Business Tax Return or Financial Statement (You may be required to provide additional information for underwriting purposes.)

Statement of Guarantee

Complete for each principal owner with 20% or more ownership in Applicant. Make additional copies if necessary.

GUARANTEE: For Value received, the undersigned unconditionally guarantees any and all obligations arising under Online Deposit, (See Online Deposit Service Disclosure and Agreement), any other check deposits, and any loans and lines of credit granted by DCU to the Applicant, as well as any extensions, increases, modifications, or renewals of such loans or lines (collectively "Loans"). The undersigned waives (i) presentment, demand, notice of protest, notice of dishonor, and notice of nonpayment, (ii) the right to require DCU to proceed against Applicant or any other guarantor liable on, or in connection with, the Loans; and (iii) the right to require bank to pursue any security property or remedy in connection with the Loans, or to notify the undersigned of any additional indebtedness incurred by the Applicant or any changes in the Applicant's financial condition, and any defense arising by reason of any defense of the Applicant or another guarantor (other than full payment of the Loan).

DCU may, without affecting the undersigned's liability hereunder, and without prior notice or consent, (a) extend, modify, compromise, accelerate, renew, increase or otherwise change the terms of the Loans, including without limitation the interest rate, amount and time for repayment, (b) proceed against one or more of the undersigned without proceeding against the Applicant or another guarantor, (c) obtain credit reports and provide credit information to others (including, without limitation, companies affiliated with DCU), regarding the undersigned from time to time, and (d) release or substitute any party liable directly or indirectly on the Loans or this Guarantee. The undersigned agrees to pay DCU's costs and attorney's fees in enforcing the Guarantee. This Guarantee shall benefit the DCU and its successors and assigns. Any indebtedness of the Applicant now or hereafter held by this undersigned is hereby subordinated to the indebtedness of the Applicant to DCU.

The undersigned agrees to be bound by the terms of the DCU's Arbitration Program Agreement that will be sent to it. The undersigned agrees to notify DCU immediately if it does not receive the Arbitration Program Agreement within ten (10) days after submittal of this guarantee to DCU upon receipt thereof.

The undersigned acknowledges and agrees that should any other person(s) or entity(ies) also guarantee all or any part of the Loans, the undersigned shall be jointly and severally liable to DCU hereunder with any and all such other person(s) or entity(ies).

THE UNDERSIGNED HAS READ AND AGREES TO THE TERMS SET FORTH ABOVE.

_____	_____	_____
Signature of Business Owner (no title)	Print Name	Date
_____	_____	_____
Signature of 2nd Business Owner (no title)	Print Name	Date

Disclosures and Signatures

The undersigned certify that the information provided on and with this form, including financial statements, is complete and correct and that we are authorized to execute this form on behalf of the Applicant. Applicant and Guarantors authorize Digital Federal Credit Union (DCU) to obtain credit reports and provide credit information to others (including, without limitation, companies affiliated with DCU) regarding Applicant and Guarantors from time to time. Applicant and Guarantors also authorize DCU to obtain copies of its tax returns and information from the IRS and other taxing authorities, and agree to execute whatever forms DCU requests to obtain such information. DCU may ask for more documentation besides this application before a decision is made on this request. If the loan(s) is approved, additional documentation will be sent to Applicant for execution and submittal to DCU.

REQUIRED SIGNERS: CORPORATION – The person(s) authorized by the corporation's Board of Directors; PARTNERSHIP – All general partners; SOLE PROPRIETORSHIP – The owner; LIMITED LIABILITY COMPANY – All Members. TRUST – Trustees.

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Digital Federal Credit Union, Commercial Lending Dept., 220 Donald Lynch Boulevard, PO Box 9130, Marlborough, MA 01752-9130, 800.328.8797 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.

NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against 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), Familial Status (having one or more children under the age of 18) and Handicap; 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 National Credit Union Administration, Office of Consumer Protection, 1775 Duke, Street, Alexandria, VA 22314.

I have read the terms and conditions for Online Deposit service.

Legal Name of Business:

Signature (Owner, Partner, Member or Authorized Officer)	Print Name	Title	Date
Signature (Owner, Partner, Member or Authorized Officer)	Print Name	Title	Date
Guarantor Signature	Print Name	Title	Date
Guarantor Signature	Print Name	Title	Date

For corporations; **Resolved:** the above are authorized to apply for credit and enter into binding loan agreements on behalf of this corporation. **Further Resolved:** That each officer named above is authorized to enter loan renewal, modification, extension and security agreements on behalf of this corporation. **Certification:** I Certify that: I am the Secretary or Clerk of the corporation; the foregoing resolution was duly adopted by the corporation's Board of Directors, is currently in effect, and has not been revoked or amended; and the signatures and titles set forth above on this application are the genuine signatures and title of the persons indicated.

Secretary or Clerk's signature Date

For Internal Use Only

Branch _____ Approved by: _____ Date: _____ Total Limit: \$ _____