



SOLE Visa Card by SOLE Financial

Employer Application

Federal law requires TFG Card Solutions, Inc. and its Issuing Bank to comply with the Bank Secrecy Act of 1970, Anti-Money Laundering legislation and the USA PATRIOT Act of 2001. The following information is requested for purposes of complying with these regulations. Please answer all of the following questions as thoroughly as possible to ensure timely processing of your application.

Registered Company Name:	
Physical Street Address:	Suite:
City:	State: ZIP:
Mailing Address (if different):	State: ZIP:
City:	Federal Tax ID #:
Contact:	Contact's Title:
Contact's Phone Number:	Contact's Email Address:
Website:	Program Launch Date:

State of Incorporation or Registration _____

Type of organization: C corp _____ S corp _____ LLC _____ Sole Proprietor _____ Partnership _____

How long has the company been in business? _____ years _____ months

Does the company have international offices or subsidiaries? _____ If yes, please list names and locations.

List all subsidiaries and locations which are majority owned by Applicant company. **Please provide separate applications for independently owned franchises, affiliated companies which are minority owned by Applicant, or companies which share common ownership but are otherwise not owned by Applicant.**

Type and Description of Business _____

Please list the name and address of any additional branch office or location where cards will be sent:

What is the expected average deposit amount (range) per card? _____

What is the expected deposit frequency? (weekly, bi-weekly, semi-monthly, monthly) _____

Is the company involved in any form of bankruptcy proceedings? _____ YES _____ NO

Has the company or any of its directors, officers, shareholders, members, proprietors, or owners been convicted of or been the subject of investigation for crimes or fraud, embezzlement, money laundering, cybercrimes, identify theft or any other offense, whether civil or criminal which might dissuade TFG Card Solutions, Inc. or its Issuing Bank in their reasonable judgment from issuing cards? _____ YES _____ NO

DEPENDENT ON THE CARD PROGRAM USED, YOU MAY BE REQUIRED TO PROVIDE A DOCUMENT FROM APPENDIX A, BASED ON COMPANY TYPE

I HEREBY ATTEST THAT THE ABOVE INFORMATION IS TRUE AND COMPLETE.

Signature (**must be an owner or officer of the company**)

Date

Print Name

Title

Appendix A:

Sole Proprietorship / DBA	Corporations
Trade Name Registration	Articles of Incorporation
Master Business License	Articles of Association
Fictitious Name Filing	

Partnerships and Limited Partnerships:

General Partnership	Limited Liability Partnership
Registered Declaration of Partnership	Registered Declaration of Partnership
Trade Name Registration	Trade Name Registration
Master Business License	Master Business License
Copy of Partnership Agreement	

Limited Partnership	Limited Liability Company
Registered Declaration of Partnership	Articles of Organization (depending on the State where the LLC is formed.)
Trade Name Registration	Certificate of Formation
Master Business License	

Association – including Not-for-Profit Organization/Society/Lodge/Community Group

Unincorporated	Incorporated
Articles of Association or the association's original Constitution and Bylaws	Articles of Incorporation
Where the association has no formal registration, obtain a document that provides evidence that the individuals opening the account on behalf of the association have the authority to do so.	Articles of Association
Charitable Registration Number if registered as Not-for-Profit	Charitable Registration Number if registered as Not-for-Profit
Charter Filing Acknowledgement	Charter Filing Acknowledgement
Business License	Business License