

APPLICATION AND AGREEMENT FOR IRREVOCABLE STANDBY LETTER OF CREDIT

Applicant name:		Advising Credit Union name:			
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Beneficiary name:			Forward standby Letter of Credit (check one): □ Directly to beneficiary □ To applicant □ Other		
Address:			Amount:		
City:	State:	Zip:	In words:		
Expiration date: Documents to be presented to Global (Other Partial drawings are: Allowed Prohibited Purpose (this information will not be included)					
Available by drafts at sight drawn on Glob following documents: Beneficiary's signed certification that: Other documents required:	al Credit Unio	n (or your corre	espondent at your option) and accompanied	by the	
Special Instructions to be included in Lett	er of Credit:				
Letter of Credit to be printed on Globa		COVENANTS A	ND AGREEMENTS SET FORTH ON THIS APPLI	CATION	
I/WE HEREDI AGREE TO ALE TERMS AND C	LONDITIONS,	COVENANTS, A	IND AGREEMENTS SETTORTH ON THIS AFFEI	CATION.	
Authorized signature		_	Date		-
Print name		_			
Date Received:					

Statement and signatures of all business owners/principals

(if more than two owners, please attach additional sheet)

Each of the undersigned certifies intent to apply for credit as indicated in this application and that everything stated herein and in attachment(s) is correct. Global may keep this application whether or not it is approved. We authorize Global and any of its duly authorized agents to obtain and use credit reports and to exchange credit information in connection with this application, and any update, renewal, or extension that Global may require. Additionally we hereby authorize Global to obtain our personal credit report(s), and/or to make employment or investigative inquiries deemed necessary by Global in connection with this application. We have the right to ask if a consumer credit report was requested, and if it was and we ask, we will be informed of the name and address of the consumer reporting agency that furnished the report. We understand and agree that Global can furnish our personal and business information to consumer reporting agencies and to others who may properly receive the information. It is understood that a photocopy or fax of this application will also serve as authorization. We understand that we must update this credit information at Global's request and if our financial condition changes. We certify that the credit being applied for will be used solely for business purposes. We understand if our credit application is denied, we have the right to a written statement of the specific reasons for the denial. In order to receive a copy of this statement, we can contact Business & Commercial Services at 877-646-6670 or PO Box 196615, Anchorage, AK 99519-6615 within 60 days from the date we are notified for Global's decision. We understand Global will send us a written statement of reasons for the denial within 30 days of our request for this statement. We understand and agree that the above statements apply to any Owner, Principal, Partner, Guarantor, and Co-Borrower.

Authorized signature	Date	
Print name		
Authorized signature	Date	
Print name		

For California residents; to learn more about how we collect, use, and share your personal information in the course of business, refer to the privacy notices located on our website: globalcu.org/about/privacy/