# **ACME Bank**

# **Credit Card Limit Application**

Limit Increase	Limit Decrease
Limit/Month Requested €	Term Requested
15.000.00	18 months

## **Application Agreement**

Each Signer has read and agrees to all applicable provisions on the reverse side of this Application (whether or not that reverse side is faxed back to ACME Bank), including the granting of a security interest in deposit accounts, and understands that this Application may be approved or denied. ACME Bank is authorized to obtain credit records and other credit and employment information about the Signers personally (now and in the future), including from state and federal tax authorities, for deciding whether to approve the requested limit.

### **Applicant Information**



Primary Authorized Officer

First Name Joanna R.

Last Name Simonitti

Phone

+1 214 291 4003

Vehicle ownership

Yes. Ford Sedan

Address

313 Stone Avenue

VIN number

JN8AZ1MU4CW113789

Social Security Number

449-09-0000

Email

jo.simonitti89@gmail.com

City

New York City, NY

Gross Annual Income €

328.000.00

As reported on last Tax Return

Date of Birth

05/10/1989

Credit Card №

5500 0000 0000 0004

ZIP Code

10001

Net Worth €

3.029.028.00

Excluding business assets

#### Terms and Conditions

By signing below, Signer agrees to be personally responsible for any credit granted pursuant to this Application. For ACME Bank Cash Flow Manager and ACME Bank Guaranteed Cash Flow Manager Lines of Credit, this Application constitutes Guaranty under which the individual signing is a Guarantor, and individually guarantees the payment of all present and future obligations of the Business to ACME Bank in accordance with the provisions on the reverse side and the Terms and Conditions and Letter Agreement governing such Line of Credit.

Signature of Applicant

Date of Signature

05/25/2020

Time of Signature

09:24 AM