Elite Business Visa® Credit Card Application

Charity Cards: You may elect at application to carry a charity card to show your support of select non-profit organizations for an annual contribution of $10 per charity card issued on the account. This contribution will be charged to your credit card account at account opening and annually thereafter. One hundred percent (100%) of contributions collected are given to the designated charity. You may cancel this election at any time by calling Credit Card Services at (865) 429-2273. If cancelled, your card will be reissued with a standard design. Smoky Mountains Card: Benefitting the Friends of the Smokies. The Patriot Card: Benefitting the Smoky Mountains Service Dogs. Please mark the appropriate box if you wish to have this card.

IMPORTANT! THE FOLLOWING INFORMATION MUST ACCOMPANY APPLICATION:
Current year financial statements including balance sheet and income statement. If an applicant is a Corporation, include a Corporate Resolution and Articles of Incorporation. If an applicant is a Partnership, include a Partnership Agreement. If an applicant is a LLC, include a LLC Agreement. If an applicant is an Organization, include a Resolution and Copy of Minutes. A Personal Guaranty will be required.

We intend to apply for joint credit: Applicant's Signature _____ Co-Applicant's Signature _____

Business Information

Business Name (Applicant)	# Cards Requested	Business EIN or Tax ID #	Hours of Operation
Address (No PO Box) Street City State Zip	# Yrs. in Business	Business Phone #	Fax Phone #
Mailing Address Street City State Zip	# Yrs. at this address	Ownership Type: Sole Proprietor ☐ Partnership ☐ LLC ☐ Corporation ☐ Non-Profit ☐	
Business Web Site	Email Address		
Is business currently involved in any pending litigation? Yes ☐ No ☐	Type of Goods/Services Offered	Total Credit Limit Requested: $	

APPLICANT INFORMATION (Make additional copies if necessary)

Name ☐ Co-Applicant ☐ Guarantor			Title		Ownership %
Credit Limit Requested	Date of Birth	Social Security #	Home Phone #		Cell Phone #
Address (No PO Box) Street City State Zip			# Yrs. at Address	Email Address	
Name of Nearest Relative NOT Living With You			Relationship	Phone #	
Drivers License #			State Issued	Issue Date	Expiration Date
Signature X					Charity Card ☐ Smoky Mtn. Card ☐ Patriot Card
Name ☐ Co-Applicant ☐ Guarantor ☐ Additional Signer			Title		Ownership %
Credit Limit Requested	Date of Birth	Social Security #	Home Phone #		Cell Phone #
Address (No PO Box) Street City State Zip			# Yrs. at Address	Email Address	
Name of Nearest Relative NOT Living With You			Relationship	Phone #	
Drivers License #			State Issued	Issue Date	Expiration Date
Signature X					Charity Card ☐ Smoky Mtn. Card ☐ Patriot Card
Name ☐ Co-Applicant ☐ Guarantor ☐ Additional Signer			Title		Ownership %
Credit Limit Requested	Date of Birth	Social Security #	Home Phone #		Cell Phone #
Address (No PO Box) Street City State Zip			# Yrs. at Address	Email Address	
Name of Nearest Relative NOT Living With You			Relationship	Phone #	
Drivers License #			State Issued	Issue Date	Expiration Date
Signature X					Charity Card ☐ Smoky Mtn. Card ☐ Patriot Card

Overdraft Protection Service

Yes! Please enroll me in the Overdraft Service. My TSB Account # is _____. I understand that funds will be automatically deposited to the designated checking account in $50.00 increments to cover items that would otherwise overdraw the account. This deposit will be charged to the credit card and will occur only if credit available is sufficient. $10 will be charged to the checking account per debit or check covered by this overdraft service. Transactions for overdraft services are Cash Advances and are subject to the Cash Advance APR.

CREDIT APPLICATION CERTIFICATION: Everything I/we have stated in this application is correct to the best of my/our knowledge. I/We understand that you will retain this application whether or not it is approved. You are authorized to check my/our employment history and to ask questions about my/our credit experiences. This application is submitted to obtain credit. I/We authorize you to (i) make inquiries (including requesting reports from consumer credit reporting agencies and other resources) in evaluating my/our credit application and subsequently in connection with my/our extension of credit, update, renewal, review or collection of my/our account for any other legal purposes and (ii) release information to others about my/our credit history with you. I/We agree this application will remain your property whether this application is approved or not.

	Owner, Principal, or President		Principal	
Signature(s)	X		X	
Date:	Name (Please Print):	Title	Name (Please Print):	Title

INTERNAL USE ONLY	DATE APPROVED	CARD TYPE	CREDIT LINE	RATE	APPROVED BY	# OF CARDS

Tennessee State Bank
Elite Business Visa® Credit Card
Applicant's Copy-To be retained by Applicant

Interest Rates and Interest Charges	
Annual Percentage Rate (APR) Purchases	**13.00%** This APR will vary with the market based on the Prime Rate
Annual Percentage Rate (APR) Balance Transfers	**13.00%** This APR will vary with the market based on the Prime Rate
APR for Cash Advances	**18.50%** (Non-Variable)
Paying Interest	Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on your purchases if you pay your entire balance by the due date each month. We will begin charging interest on cash advances and balance transfers on the date the transaction is posted to your account.
Minimum Interest Charge	None
For Credit Card Tips from the Consumer Financial Protection Bureau	**To learn more about factors to consider when applying for or using a credit card, visit the website of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore.**

Fees	
Annual Fee	**None**
Transaction Fees • Balance Transfer Fee • Cash Advance • Foreign Transaction • ATM Fee	 • **None** • Either **$5** or **4%** of the amount of each cash advance, whichever is greater (maximum fee: **$50**). • **1%** of each transaction in U.S. dollars. • **None**
Penalty Fees • Late Payment • Returned Payment	 • Up to **$29** • Up to **$29**

How We Will Calculate Your Balance: We use a method called "average daily balance (including new purchases)".

Card Replacement Fee: $5—We may charge this fee for any replacement card ordered by the cardholder.
Documentation Copies: $3/copy—We may charge this fee for each copy provided.
Expedited Delivery Fee: $40—We may charge this fee if you request expedited delivery of new or replacement cards.
Stop Payment Fee: $33—We may charge this fee if you request a stop payment on an automated recurring charge to your credit card account.
ATM Fee: None if transaction is completed at one of the Bank's proprietary Automated Teller Machines (ATMs).

Overdraft Service (Credit Card Courtesy Pay): You may elect to enroll in an overdraft service with your credit card. This service will provide overdraft coverage on a designated checking account. In the event the checking account becomes overdrawn, a Cash Advance in an amount to cover the overdraft will be charged to the credit card in increments of $50.00 and deposited into the checking account. This service is a Cash Advance and is subject to the Cash Advance APR, but will not incur the Cash Advance fee. The Cash Advance will only occur if the available credit is sufficient on your credit card. There will be a $10.00 overdraft item fee on the checking account for each debit or check that is covered by this overdraft service. In the event there are not sufficient funds on your credit card to cover the overdraft, the normal checking account overdraft item fee(s) or return item fee(s) will apply.

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Disclosure Effective 10.01.2026. Information about the costs and the rates is accurate as of January 2026. This information may have changed after that date. You may contact us to find out what may have changed by directing inquiries to Tennessee State Bank, Attention: Card Services, P.O. Box 1260, Pigeon Forge, TN 37868-1260; or call us toll-free at (877) 908-4TSB (4872).

USA Patriot Act

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT, UPDATING AN ACCOUNT OR PERFORMING TRANSACTIONS

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens or updates an account or performs transactions.

What this means to you: When you open or update an account or perform a transaction, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents and retain copies of those documents.

When opening or updating an account, we may also ask other information of you required by current regulatory guidance such as if you perform money services business activities; if you may be related to any foreign political official; and what levels of different types of transactions you expect to perform in your account.