

| Business Information | | Card Information | | | | | |
|--|--------------------------------------|---|---|--|--|--|--|
| BUSINESS NAME & ADDRESS 987 88 Scott Street Toronto, ON M5E0A9 | | CARD TYPE CWB Business | BUSINESS NAME ON CARD 987 | | | | |
| NATURE OF BUSINESS Agriculture, Fishing, Forestry, Mining | BUSINESS TYPE Sole Proprietorship | CREDIT LIMIT REQUESTED \$88 | CWB BUSINESS PRO PACKAGE UPGRADE Yes | | | | |
| CIF NUMBER 88 | HOME BRANCH Toronto | DELIVERY METHOD* | * There will be a \$25 CAD fee per card for express delivery with tracking number. Fast Card option only applies to physical card deliveries and will not affect the time to process the application. | | | | |
| Admin(s) | | Cardholder(s) | | | | | |
| | | PRIMARY CARDHOLDER sdgr rhe January 01, 2000 prim999@yopmail.com 123 123 1234 eahatz | | | | | |

Alternate Mailing Instructions (within Canada and U.S. only)

Authorization

The client acknowledges that they are agreeing to add a business Mastercard product to their portfolio with CWB.

The Canadian Western Bank Business Mastercard Cardholder Agreement along with other relevant credit card information will be provided once your account has been setup.

| Dated at | | this | (| day of | | | , 20 | |
|--------------------------|------|------|-------------------------|--------|--|------|------|--|
| SIGNER(S) | | | SIGNER(S) | | | | | |
| First and Last Name: | | | First and Last Name: | | | | | |
| Position Title: | | | Position Title: | | | | | |
| | | | | | | | | |
| Signature | Date | | Signature | | | Date | | |
| CWB RELATIONSHIP MANAGER | | | APPLICATION PREPARED BY | | | | | |
| First and Last Name: | | | CWB Operator | | | | | |
| Banking Center: | | | , Branch | | | | | |
| | | | | | | | | |
| Signature | Date | | | | | | | |