



APPLICATION FOR ALL CREDIT

LOAN AMOUNT REQUESTED \$ _____	TO BE REPAYED IN (estimated) MONTHS _____	REQUESTED PERIODIC PAYMENT \$ _____	PURPOSE OF LOAN AND COLLATERAL OFFERED
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 OPEN END
 CLOSED END
 CREDIT CARD

THIS APPLICATION IS FOR (Check one of the boxes below): **NOTICE: MARRIED APPLICANTS MAY APPLY FOR INDIVIDUAL CREDIT**

AN INDIVIDUAL ACCOUNT
 A JOINT LOAN/ACCOUNT WITH MY SPOUSE
 A JOINT LOAN/ACCOUNT WITH A CO-APPLICANT

MUST SIGN BELOW

I intend to apply for joint credit. Applicant Signature **X** Co-Applicant Signature **X**

Complete application section. Complete spouse/co-applicant section if (1) this is to be a joint account, (2) my spouse will use this account, (3) I live in a community property state (Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, Wisconsin, or Puerto Rico), or (4) I am relying on my spouse's income in applying for this account. This section must also be completed about my co-applicant if this is for a joint account with someone other than my spouse.

APPLICANT	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> OTHER	<input type="checkbox"/> GUARANTOR
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Name	Member Number	Spouse/Other Applicant's Name	Member Number
Street Address		Street Address	
City, State, Zip	How Long Yrs. Mos.	City, State, Zip	How Long Yrs. Mos.
Social Security Number	Date of Birth	Social Security Number	Date of Birth
My Home Phone No.	My Work No.	My Home Phone No.	My Work No.
Street Address (Previous Address)		Street Address (Previous Address)	
City, State, Zip	How Long Yrs. Mos.	City, State, Zip	How Long Yrs. Mos.
Employer (If Part Time, # of Hrs. Wkly _____)		Employer (If Part Time, # of Hrs. Wkly _____)	
Employer's Address (City & State)	Date Employed	Employer's Address (City & State)	Date Employed
Job Title	Supervisor's Name & Phone No.	Job Title	Supervisor's Name & Phone No.
Applicant's Salary	Additional Income & Source	Other Applicant's Salary	Additional Income & Source
<input type="checkbox"/> Weekly Gross \$ _____	\$ _____	<input type="checkbox"/> Weekly Gross \$ _____	\$ _____
<input type="checkbox"/> Monthly		<input type="checkbox"/> Monthly	
Former Employer	Dates Employed From: To:	Former Employer	Dates Employed From: To:
Nearest Relative's Name (not living with me)	Phone No.	Nearest Relative's Name (not living with me)	Phone No.
Relative's Address & their relationship to me (father, mother, etc.) _____		Relative's Address & their relationship to me (father, mother, etc.) _____	
Personal Reference	Phone No.	Personal Reference	Phone No.
Address		Address	

Alimony, child support, or separate maintenance need not be revealed if I do not wish to have it considered as a basis for repaying obligations under this contract.

PROOF OF INCOME IS REQUIRED (pay stub, income tax form 1040 or W-2)

FINANCIAL OBLIGATIONS OF BOTH APPLICANT AND CO-APPLICANT - PLEASE INCLUDE ALL OBLIGATIONS - USE SEPARATE SHEET IF NECESSARY

Residence: I live in a <input type="checkbox"/> house, <input type="checkbox"/> apartment, <input type="checkbox"/> condo or <input type="checkbox"/> mobile home. (Please check one) I <input type="checkbox"/> Own, <input type="checkbox"/> Rent, <input type="checkbox"/> or Live with parents.	Balance	Monthly Payment	Interest Rate
Vehicle #1 Yr. Make: Model: Financed With:			
Vehicle #2 Yr. Make: Model: Financed With:			
List all obligations including Credit Cards (if there is not sufficient space, attach a separate sheet)			
Alimony Child Support (Check one, if applicable) <input type="checkbox"/> Court Ordered <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding			

PERMISSION TO CONTACT: By providing the Credit Union with a wireless phone number (cell phone), you consent to receiving calls, including autodialed and prerecorded messages from the Credit Union or its third party debt collector at that number.

I AUTHORIZE THE USE OF ALL ELECTRONIC SIGNATURES, FACSIMILE SIGNATURES AND PHOTOCOPIED SIGNATURES FOR ALL PURPOSES, SAID SIGNATURES TO HAVE THE SAME FORCE AND EFFECT AS ORIGINAL SIGNATURES FOR ALL TRANSACTIONS, INCLUDED IN APPLICATIONS OR AGREEMENTS WITH YOU.

I grant permission to you to garnish head of family earnings, if collection proceedings are brought against me.
If you reasonably determine any stock pledged as Collateral under any stock secured loan has become insufficient to fully secure my obligations under this Note by reason of a decline in the market value thereof, I must either (i) pledge additional stock in an amount you deem sufficient to fully secure my outstanding Sub-Account balance, or (ii) reduce my outstanding Sub-Account balance (by prepayment) so that the stock previously pledged is sufficient to fully secure my outstanding loan balance.

It is the Credit Union's policy to not discriminate against any applicant with respect to race, color, religion, national origin, sex, marital status, age, the receipt of public assistance, part time income, or exercising rights under any consumer protection credit act. In addition, it is our policy not to discriminate based on familial status or a handicap in the extension of credit for housing. It is the Credit Union's intent to comply with all consumer credit protection statutes and regulations.

I AGREE THAT EVERYTHING STATED IN THIS APPLICATION WHETHER ORAL, WRITTEN, OR THROUGH A FAX MACHINE IS CORRECT TO THE BEST OF MY KNOWLEDGE. THE CREDIT UNION IS AUTHORIZED TO INVESTIGATE MY CREDIT-WORTHINESS, EMPLOYMENT HISTORY, AND TO OBTAIN A CREDIT REPORT AND TO ANSWER QUESTIONS ABOUT THEIR CREDIT EXPERIENCE WITH ME. I UNDERSTAND THAT ANY FALSE OR MISLEADING STATEMENTS IN MY APPLICATION MAY CAUSE ANY LOAN OR EXTENSION TO BE IN DEFAULT. I UNDERSTAND THAT 18 U.S.C. §1014 MAKES IT A FEDERAL CRIME TO KNOWINGLY MAKE ANY FALSE STATEMENT ON THIS APPLICATION.

The USA Patriot Act requires that you verify the identity of all account holders. You may ask me or my co-applicant to show proof of our identity.

X _____ **X** _____
Applicant Signature Date Other Applicant Signature Date

VISA CREDIT CARD REQUEST AND DISCLOSURE

ANNUAL PERCENTAGE RATE For Purchases	VISA Credit Card- 9.9%,10.5%,10.9% non-variable. The rates vary depending on the type of card you qualify for based on your creditworthiness when you open your account. VISA Secured Credit Card- 10.9%
ANNUAL PERCENTAGE RATE For Balance Transfers	VISA Credit Card- 9.9%,10.5%,10.9% non-variable. The rates vary depending on the type of card you qualify for based on your creditworthiness when you open your account. VISA Secured Credit Card- 10.9%
ANNUAL PERCENTAGE RATE For Cash Advances	VISA Credit Card- 9.9%,10.5%,10.9% non-variable. The rates vary depending on the type of card you qualify for based on your creditworthiness when you open your account. VISA Secured Credit Card- 10.9%
Paying Interest	Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on purchases or balance transfers if you pay your entire balance by the due date each month. We will begin charging interest on cash advances on the transaction date.
For Credit Card Tips From The Consumer Financial Protection	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
Set-up And Maintenance Fees Annual Fees Lost Card Replacement	None \$10.00
Transaction Fees	1% of transaction amount on foreign transactions
Penalty Fees Late Payment Return Payment	up to \$20.00 \$25.00

How We Will Calculate Your Balance: We use a method called "Daily Balance (including new purchases)". See your account agreement for more details.
Billing Rights: Information on your rights to dispute transactions and how to exercise those rights is provided in your Account agreement.

CREDIT CARD REQUEST

I/We request that a credit card(s) be issued on my/our account and agree that I/We will be bound by the terms and conditions of the Credit Card Agreement and Disclosure and all the amendments when I/we use the card(s). Before we approve you for a credit card, we will review your credit report, and the information you provide with your application to confirm that you meet the criteria for a card listed above.

CONSENSUAL SECURITY INTEREST. If your application for a credit card is approved, you acknowledge that the granting of a security interest in your share accounts is a condition of the approval of a Credit Card Account. By signing below, you grant a security interest to the Credit Union in all individual and joint share accounts you have with the Credit Union now and in the future to secure your Account. You authorize the Credit Union to apply the balance in these share account(s) to pay any amounts due under your Credit Card Agreement and Disclosure if your account is ever in default. You are not giving a security interest in any shares or funds in any IRA, SEP, Keogh, or any other share account which, if pledged, would result in the loss of special tax treatment under the Internal Revenue Code.

Share Secured VISA Applicants ONLY: Secured pledge of share \$ _____ in Account # _____

X _____ **X** _____
Signature of Applicant/Borrower Date Signature of Spouse/Co-applicant (if applicable) Date