

VISA Classic Credit Card Application



APPLICANT INFORMATION

Name		Social Security Number
Address		
City		State Zip
Home Phone	E-mail Address	Business Phone
Employer		Position Date Hired
Business Address		Gross Annual Income
Monthly Rent or Mortgage Payment	Limit Requested	Date of Birth

CO-APPLICANT INFORMATION

Name		Social Security Number
Address		
City		State Zip
Home Phone	E-mail Address	Business Phone
Employer		Position Date Hired
Business Address		Gross Annual Income
Monthly Rent or Mortgage Payment	Relationship to Applicant	Date of Birth

This statement is submitted to obtain credit and I/we certify that all information herein is true and complete. I/we also authorize the credit union to verify or obtain further information the credit union may deem necessary concerning my/our credit standing. I/We understand that if this application is approved and a VISA card(s) issued, the undersigned applicant(s) by signing, using or permitting another to use the VISA card(s) agree(s) that the applicant(s) will be bound by the terms, conditions, and all amendments of the forthcoming agreement. Please carefully read the agreement prior to using your VISA card(s).

Applicant's Signature		Date	Co-Applicant's Signature		Date
CREDIT UNION USE ONLY	<input type="checkbox"/> APPROVED	<input type="checkbox"/> REJECTED	CREDIT LIMIT \$	DATE	LOAN OFFICER SIGNATURE

DISCLOSURE AS REQUIRED BY SECTION 520 OF THE NY GENERAL BUSINESS LAW

ANNUAL PERCENTAGE RATE 9.90%	VARIABLE RATE INFORMATION N/A	ANNUAL MEMBERSHIP FEE \$0	GRACE PERIOD FOR PURCHASES 25 DAYS	METHOD OF COMPUTING THE FINANCE CHARGE BALANCE FOR PURCHASES Average Daily Balance (including new purchases)	MISCELLANEOUS FEES LATE FEE \$10.00
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