

**CALCITE CREDIT UNION**  
**APPLICATION FOR VISA CREDIT CARD**

Individual Credit     Joint Credit: We intend to apply for joint credit: (Applicant) \_\_\_\_\_ (Joint Applicant) \_\_\_\_\_

Member/Applicant Share Account Number: \_\_\_\_\_ Requested Credit Limit: \$ \_\_\_\_\_

Member Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Drivers License No. \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_

Address: \_\_\_\_\_ How Long? \_\_\_\_\_  
(address) (city) (state) (zip)

Previous Address \_\_\_\_\_ How Long? \_\_\_\_\_  
(address) (city) (state) (zip)

Home Phone(\_\_\_\_) \_\_\_\_\_ Cell Phone(\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

**EMPLOYMENT INFORMATION**

Employer: \_\_\_\_\_ Position \_\_\_\_\_ How Long? \_\_\_\_\_

Business Address: \_\_\_\_\_ Business Phone: (\_\_\_\_) \_\_\_\_\_

Gross Monthly Income: \_\_\_\_\_ Net Monthly Income: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Position \_\_\_\_\_ How Long? \_\_\_\_\_

Previous Business Address: \_\_\_\_\_

**JOINT APPLICANT INFORMATION**

Joint Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Drivers License No. \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_

Address: \_\_\_\_\_ How Long? \_\_\_\_\_  
(address) (city) (state) (zip)

Previous Address \_\_\_\_\_ How Long? \_\_\_\_\_  
(address) (city) (state) (zip)

Home Phone(\_\_\_\_) \_\_\_\_\_ Cell Phone(\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

**JOINT APPLICANT EMPLOYMENT INFORMATION**

Employer: \_\_\_\_\_ Position \_\_\_\_\_ How Long? \_\_\_\_\_

Business Address: \_\_\_\_\_ Business Phone: (\_\_\_\_) \_\_\_\_\_

Gross Monthly Income: \_\_\_\_\_ Net Monthly Income: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Position \_\_\_\_\_ How Long? \_\_\_\_\_

Previous Business Address: \_\_\_\_\_

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**Other Income:**

Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

**Applicant:**

Alimony, Child support, separate maintenance received under: Court Order \_\_\_\_\_ written agreement \_\_\_\_\_ oral understanding \_\_\_\_\_

Other Income \$ \_\_\_\_\_ per \_\_\_\_\_. Source(s) of other income \_\_\_\_\_

Is any income listed in this Section likely to be reduced in the next two years?

Yes \_\_\_\_\_ (Explain in detail on a separate sheet.) No \_\_\_\_\_

**Joint Applicant:**

Alimony, Child support, separate maintenance received under: Court Order \_\_\_\_\_ written agreement \_\_\_\_\_ oral understanding \_\_\_\_\_

Other Income \$ \_\_\_\_\_ per \_\_\_\_\_. Source(s) of other income \_\_\_\_\_

Is any income listed in this Section likely to be reduced in the next two years?

Yes \_\_\_\_\_ (Explain in detail on a separate sheet.) No \_\_\_\_\_

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**OUTSTANDING DEBTS:** (Include charge accounts, installment contracts, credit cards, rent, mortgages, etc. Use separate sheet if necessary.)

_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
Mortgagee or Landlord	Payment Address	Approx. Market Value	Orig. Amount	Balance Due	Mo. Pmt./Rent
_____	_____	_____	\$ _____	\$ _____	\$ _____
Auto Owned – Make	Financed By	_____	Orig. Amount	Balance Due	Mo. Pmt.
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
Other Debts	Account Number	Orig. Amount	Balance Due	Mo. Pmt.	_____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
Other Debts	Account Number	Orig. Amount	Balance Due	Mo. Pmt.	_____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
Other Debts	Account Number	Orig. Amount	Balance Due	Mo. Pmt.	_____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
Other Debts	Account Number	Orig. Amount	Balance Due	Mo. Pmt.	_____

Other Obligations – (For example, liability to pay alimony, child support, separate maintenance.)

\_\_\_\_\_

Checking Account:

Location \_\_\_\_\_ Acct. No. \_\_\_\_\_

Savings Account:

Location \_\_\_\_\_ Acct. No. \_\_\_\_\_

**CREDIT INSURANCE:** Credit Insurance is available for a nominal cost and is not required for you to be approved for credit. If you are interested in Credit Insurance please check below. If you are approved for credit the information involved will be sent to you.

Credit Disability \_\_\_\_\_ Single Credit Life \_\_\_\_\_ Joint Credit Life \_\_\_\_\_

MUST sign below – I understand that I may purchase credit life and/or disability insurance on this loan. Any uninsured balance is payable upon death.

X \_\_\_\_\_ X \_\_\_\_\_  
Member Signature Joint Applicant's Signature

**REFERENCES:**

Name of (2) references not living with you:

1.) \_\_\_\_\_ Address \_\_\_\_\_ Relationship \_\_\_\_\_  
2.) \_\_\_\_\_ Address \_\_\_\_\_ Relationship \_\_\_\_\_

**Misc. Info.**

Are you a co-borrower, co-signer, endorser, or guarantor on any loan or contract? Yes \_\_\_\_\_ No \_\_\_\_\_  
If Yes, for whom? \_\_\_\_\_

Are there any unsatisfied judgments against you? Yes \_\_\_\_\_ No \_\_\_\_\_ Amount? \_\_\_\_\_ To Whom? \_\_\_\_\_

Have you ever had a car or other personal property repossessed by a creditor, filed for bankruptcy, or been a party to a wage assignment or collection suit? Yes \_\_\_\_\_ No \_\_\_\_\_  
If your answer to any part of the question is yes, please give details. \_\_\_\_\_

COMPLETE THE FOLLOWING ONLY IF YOU RESIDE IN A COMMUNITY PROPERTY STATE (ARIZONA, CALIFORNIA, IDAHO, LOUISIANA, NEVADA, NEW MEXICO, TEXAS, WASHINGTON OR WISCONSIN); OR IF ANOTHER PERSON WILL BE JOINTLY LIABLE ON THE ACCOUNT.

Married: \_\_\_\_\_ Separated \_\_\_\_\_ Unmarried \_\_\_\_\_

**APPLICATION AND AGREEMENT**

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. 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 and conditions accompanying the VISA card(s) and all amendments. My (our) signature(s) represents acknowledgement of receipt and agreement to the terms and conditions of the VISA Credit Card Agreement and Disclosures

X \_\_\_\_\_ (signature) \_\_\_\_\_ (date)

X \_\_\_\_\_ (signature) \_\_\_\_\_ (date)

**Credit Union Use Only**

Approved Credit Limit: \$ \_\_\_\_\_ Platinum: \_\_\_\_\_ Classic: \_\_\_\_\_

Not Approved; reason(s):

**CREDIT COMMITTEE** DATE **CREDIT COMMITTEE** DATE

X \_\_\_\_\_ X \_\_\_\_\_

**Calcite Credit Union  
VISA Credit Disclosures**

<b>INTEREST RATES AND OTHER CHARGES</b>		
	<b>Platinum</b>	<b>Classic</b>
<b>Annual Percentage Rate (APR) for Purchases</b>	<b>9.5%</b>	<b>11.0%</b>
<b>APR for Balance Transfers and Cash Advances</b>	<b>9.5%</b>	<b>11.0%</b>
<b>How to Avoid Paying Interest on Purchases</b>	Your due date is at least 25 days after the close of each billing cycle. We will not charge you any interest on purchases if you pay your entire balance by the due date each month.	
<b>Minimum Interest Charge</b>	None.	
<b>For Credit Card Tips from the Federal Reserve Board</b>	To learn more about factors to consider when applying for or using a credit card, visit the website of the Federal Reserve Board at <a href="http://www.federalreserve.gov/credit card">http://www.federalreserve.gov/credit card</a>	

<b>FEES</b>	
<b>Set-up and Maintenance Fees:</b>	
• Card Replacement	<b>\$3</b>
• Document Copy	<b>\$5</b>
<b>Transaction Fees</b>	None
<b>Penalty Fees:</b>	
• Late Payment	<b>\$25</b>
• Over-the-Credit Limit	None
• NSF Check	<b>\$25</b>

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

The information about the costs of the card described in this application is accurate as of March 2010. This information may have changed after that date. To find out what may have changed, call us at 989-734-4130, or write to us at 478 N. Third Street, Rogers City, MI 49779.