Bethex FCU Credit Card Application

A table that includes the APRs and other required cost disclosures for credit card applications is on the reverse side of this application.

Check below to indicates the type of credit for which you are applying. Married Applicants may apply for a separate account.

☐ **Individual Credit:** You must complete the **Applicant** section about yourself and the **Other** section about your spouse if (1) you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA,WI); (2) your spouse will use the account, or (3) you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenace, complete the **Other** section to the extent possible about the person on whose payments you are relying.

☐ **Joint Credit:** Each applicant must **individually** complete the appropriate section bellow. If Co-Borrower is spouse of the applicant, mark the Co-Applicant box.

☐ **Guarantor:** Complete the **Other** section if you are a guarantor on account/loan.

Applicant

NAME (Last– First– Initial): _____

MOTHER'S MAIDEN NAME _____

Social Security Number : _____ - _____- _____ **Account #** _____

Birth Date(mm-dd-yyyy) Home Phone Work Phone

- - ( ) ( )

Present Address: (Street)_____

(City)_____, (State)_____(Zip)_____

Years at this address_____ ☐ Own ☐ Rent

☐ MARRIED ☐ SEPARATED ☐ UNMARRIED (single– divorced-widowed)

Driver's License # _____Email:_____

Employment / Income

Employer: _____

Address:_____

Start Date: Position:

Salary $_____ per_____ ☐ Net ☐ Gross

Other: ☐ Co-Applicant ☐ Spouse ☐ Guarantor

NAME (Last-First-Initial): _____

MOTHER'S MAIDEN NAME _____

Social Security Number :_____ - _____- _____**Account #** _____

Birth Date (mm-dd-yyyy) Home Phone Work Phone

- - ( ) ( )

Present Address: (Street)_____

(City)_____, (State)_____(Zip)_____

Years at this address_____ ☐ Own ☐ Rent

☐ MARRIED ☐ SEPARATED ☐ UNMARRIED (single– divorced-widowed)

Driver's License # _____ Email:_____

Employment / Income

Employer: _____

Address:_____

Start Date: Position:

Salary $_____ per_____ ☐ Net ☐ Gross

Signatures

You promise that everything you have stated in this application is correct to the best of your knowledge. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension, or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions or state chartered credit unions insured by NCUA. You understand that the use of your card will constitute acknowledgment of receipt and agreement to the terms of the credit card agreement. **A condition of your account is your granting us a security interest in your share accounts. By signing below you grant us a security interest in all individual and joint share and/or deposit accounts you have with us now and in the future to secure your credit card account. Shares and deposits in an individual Retirement Account and any other account that would lose special tax treatment under state or federal law if given as security are not subject to this security interest. When you are in default we may apply the balance in these accounts to any amounts due under the credit card agreement.**

X

APPLICANT'S SIGNATURE **DATE**

X

OTHER SIGNATURE **DATE**

FOR CREDIT UNION USE ONLY:

Interest Rate: _____%

Balance Trasnfer: ☐ Yes ☐ No

☐ APPROVED ☐ DECLINED No. OF CARDS_____ CREDIT LIMIT $_____

CREDIT COMMITTEE OR LOAN OFFICER SIGNATURE_____

CREDIT CARD # _____