

**Interest Rates and Interest Charges**

Visa®

<b>Annual Percentage Rate (APR) for Purchases</b>	<b>15.90%</b> Fixed
<b>APR for Balance Transfers</b>	<b>15.90%</b> Fixed
<b>APR for Cash Advances</b>	<b>15.90%</b> Fixed
<b>Penalty APR and When it Applies</b>	<b>No Penalty Interest</b>
<b>How to Avoid Paying Interest on Purchases</b>	Your due date is at least <b>25</b> days after the close of each billing cycle. We will not charge you interest on retail purchases if you pay your entire balance by the due date. We will begin charging interest on cash advances and/or balance transfers on the transaction date.
<b>Minimum Interest Charge</b>	If you are charged interest, the charge will be no less than <b>\$1.00</b> .
<b>For Credit Card Tips from the Consumer Financial Protection Bureau</b>	To learn more about factors to consider when applying for or using a credit card, visit the web site of the Consumer Financial Protection Bureau at <a href="http://www.consumerfinance.gov/learnmore">http://www.consumerfinance.gov/learnmore</a> .

**Fees**

Visa®

<b>Annual Fee</b>	No Annual Fees
<b>Transaction Fees</b> <ul style="list-style-type: none"><li>• Balance Transfer</li><li>• Cash Advances</li><li>• Foreign Transaction</li></ul>	No Balance Transfer Fees  <b>2.0%</b> of the amount advanced ( <b>\$2.00</b> min., <b>\$10.00</b> max.)  <b>1%</b> of each transaction in U.S. Dollars
<b>Penalty Fees</b> <ul style="list-style-type: none"><li>• Late Payment</li><li>• Over-the-Credit-Limit</li><li>• Returned Payment</li></ul>	Up to <b>\$15.00</b>  No over the credit limit fee  Up to <b>\$15.00</b>

**Telephone Payment Fees**

A **\$10.00** fee will apply if you talk to a credit card representative to process a phone payment.

**How We Will Calculate Your Balance:** We use a method called "average daily balance" (including new purchases).\* An explanation of this method is provided in your account agreement.  
**Billing Rights:** Information on your rights to dispute transactions and how to exercise those rights is provided in your account agreement.

# CREDIT APPLICATION

**Check Account Choice:**  
(Signature required for joint applicant)

- Individual Account  
 Joint Account  
 We intend to apply for joint credit  
 Applicant Initials \_\_\_\_\_ Co-Applicant Initials \_\_\_\_\_  
 Credit Line Increase

Credit Limit Requested \$ \_\_\_\_\_

**IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT:** To help the government fight the funding of terrorism and money laundering activities, Federal laws require all financial institutions to obtain, verify and record information that identifies each person who opens an Account. What this means to you: When you open an Account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

<b>APPLICANT</b>	Last Name		First		Middle		Social Security Number				
	Date of Birth	No. of Dependents	Home Phone ( )		Cell Phone ( )		Own <input type="checkbox"/>	Rent <input type="checkbox"/>	Other <input type="checkbox"/>	Monthly Payment \$	
	Email Address										
	Current Address			City		State	Zip Code		How Long (yrs)		
	Mailing Address (if different from above)			City		State	Zip Code		How Long (yrs)		
	Previous Address (if less than 2 years at present address)			City		State	Zip Code		How Long (yrs)		
	Employer			Self Employed <input type="checkbox"/> Yes <input type="checkbox"/> No		Work Phone ( )		Date Employed			
	Address					Position/Occupation		Monthly Gross Income \$			
	Name and Address of Previous Employer (if less than 2 years at present employer)							How Long (yrs)			
	Source of Additional Income: Income from alimony, child support or separate maintenance need not be revealed if it is not considered in determining creditworthiness							Amount per Month \$			
Nearest Relative (Not Living With You)					Home Phone ( )		Relationship				
<b>CO-APPLICANT</b>	Last Name		First		Middle		Social Security Number				
	Date of Birth	No. of Dependents	Home Phone ( )		Cell Phone ( )		Own <input type="checkbox"/>	Rent <input type="checkbox"/>	Other <input type="checkbox"/>	Monthly Payment \$	
	Email Address										
	Current Address			City		State	Zip Code		How Long (yrs)		
	Previous Address (if less than 2 years at present address)			City		State	Zip Code		How Long (yrs)		
	Employer			Self Employed <input type="checkbox"/> Yes <input type="checkbox"/> No		Work Phone ( )		Date Employed			
	Address					Position/Occupation		Monthly Gross Income \$			
	Source of Additional Income: Income from alimony, child support or separate maintenance need not be revealed if it is not considered in determining creditworthiness							Amount per Month \$			
	Name and Address of Creditor			Name under Which Account is Carried		Account Number		Balance		Monthly Payment	
	1. Home Mortgage/Rent										
2. Bank Credit Card/Bank Name and Address											
<b>CREDIT INFO</b>											
<b>SIGNATURES</b>	<p><b>PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING:</b> This statement is submitted to obtain credit and I/we certify that all information herein is true and complete. I/We agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of this institution. I/We agree to be bound by the terms and conditions of the cardholder agreement, a copy of which will be mailed to the applicant if this application is granted, receipt of such agreement and acceptance of such terms to be conclusively presumed by the applicant's use. If you intend to apply for joint credit, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. We may report information about your account to the credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.</p>										
	X _____			Date _____			X _____			Date _____	
Applicant Signature						Co-Applicant Signature					
<b>TRANSFER OF BAL REQUEST</b>	Upon approval, I wish to transfer my present balance on the credit card account(s) listed below to my new credit card account.										
	<input type="checkbox"/> Credit Card Account Number _____			Amount to be transferred \$ _____							
Signature _____											
<b>FOR INTERNAL USE ONLY</b>	Visa Account No. _____										
	Date Approved		Credit Line		Approved By						