

Credit Application



Check Account Choice:
(Only One)

- Individual Account
 Joint Account
 Credit Limit Increase

CREDIT LIMIT REQUESTED

\$ _____

APPLICANT Note: All applicable sections should be filled out completely. If not, processing of your application may be delayed.

<u>Last Name</u>	<u>First</u>	<u>Middle</u>	<u>Social Security Number</u>	
<u>Date of Birth</u>	<u>No. of Dependents</u>	<u>Home Phone</u>	<u>Mobile Phone</u>	<u>Account Number</u>
<u>Street Address</u>	<u>City</u>	<u>State</u>	<u>Zip Code</u>	<u>How Long (yrs)</u>
<u>Previous Address if < 2 yrs at current</u>	<u>City</u>	<u>State</u>	<u>Zip Code</u>	<u>How Long (yrs)</u>
<u>Email Address</u>				<u>Self employed?</u>
<u>Employer</u>		<u>Position / Occupation</u>		<u>How Long (yrs)</u>
<u>Address</u>		<u>Work Phone Number</u>		<u>Monthly Net Income</u> \$
<u>Name and Address of Previous Employer if current employment is less than 2 yrs</u>				<u>Amount Per Month</u> \$
<u>Source of any additional income *</u>				<u>How Long (yrs)</u>
*You need not furnish alimony, child support or maintenance income information if you do not want us to consider it in the evaluation of your application.				
<u>Nearest Relative (Not Living With You)</u>		<u>Home Phone</u>	<u>Relationship</u>	
<u>Relative's Address</u>		<u>City</u>	<u>State</u>	<u>Zip Code</u> <u>Mobile Phone</u>
<u>Loan Purpose</u>	<u>Creditor Name and Address</u>	<u>Highest Limit</u>	<u>Current Balance</u>	<u>Monthly Pymt</u>
1. Mortgage ___ Rent ___		\$	\$	\$
2. Automobile(s)		\$	\$	\$
3. Child or other support payments		\$	\$	\$
4. Student Loan		\$	\$	\$
5. Credit Card		\$	\$	\$
6. Other		\$	\$	\$
7.		\$	\$	\$
TOTALS			\$	\$
Do you have any judgments of collections?		<input type="radio"/> Yes <input type="radio"/> No		
CREDIT REFERENCE INFORMATION Attach additional sheet if necessary.				
<u>Financial Institution Name and Address</u>			<u>Branch if any</u>	
<u>Checking Account Number</u>			<u>Savings Account Number</u>	

VERMILLION FEDERAL CREDIT UNION
 105 East Cherry Street
 Vermillion, SD 57069
 (605) 677-5214
 WWW.VERMILLIONFCU.COM

CO-APPLICANT or SPOUSE

Complete this section only if co-applicant or spouse is applying for joint credit.

<u>Last Name</u>	<u>First</u>	<u>Middle</u>	<u>Social Security Number</u>	
<u>Date of Birth</u> ---	<u>No. of Dependents</u>	<u>Phone</u>	<u>Email</u>	
<u>Street Address</u>	<u>City</u>	<u>State</u>	<u>Zip Code</u>	<u>How Long (yrs)</u>
<u>Previous Address if < 2 yrs</u>	<u>City</u>	<u>State</u>	<u>Zip Code</u>	<u>How Long (yrs)</u>
<u>Employer:</u>	<u>Work Phone</u>			<u>How Long (yrs)</u>
<u>Employer Address:</u>	<u>Position/Occupation</u>			<u>Income Monthly</u> \$
<u>DEBTS: (other then listed on front)</u> Creditor:	Own ___ Rent ___ Monthly payment \$	<u>Automobile Payment(s)</u> \$	<u>Child or other support</u> Pymt \$	
<u>Other debts such as student loan, credit cards etc. Include monthly payment amount:</u>				
<u>If additional income list the source:*</u>				<u>Amount: \$</u>

* You need not furnish alimony, child support, maintenance or other income information if you do not want us to consider it in the evaluation of your application.

CREDIT DISCLOSURES

Annual Percentage Rate	10.25%	This APR will vary with the market based on the Prime Rate
APR for Balance Transfers	10.25%	This APR will vary with the market based on the Prime Rate
APR for Cash Advances	10.25%	This APR will vary with the market based on the Prime Rate
How to Avoid Paying Interest on Purchases	Your due date is 28 days after the close of each billing cycle. We will not charge you interest on purchases if you pay your entire balance by the due date each month. We will begin charging interest on cash advances and balance transfers on the transaction date.	
Minimum Interest Charge	No minimum Interest Charge.	
For Credit Card Tips from the Federal Reserve Board	To learn more about factors to consider when applying for or using a credit card, visit the website of the Federal Reserve Board at http://www.federalreserve.gov/creditcard	

FEES

Annual Fee	None
Application Fee	\$15.00 (one time fee at application)
Transaction Fees:	
* Balance Transfer	\$2.00
* Cash Advance	\$2.00
* Foreign Transaction	1.00% of each transaction in U.S. dollars
Penalty Fees:	
* Late Payment	\$10.00
* Over The Limit	\$10.00
* Returned Payment	\$20.00

How We Will Calculate Your Balance: We use a method called "average daily balance (including new purchases)*"**How We Will Calculate Your Variable Rate:** We calculate your variable rate by adding seven (7%) percent to the Prime Rate published in the "Money" section of *The Wall Street Journal* on the 1st day of January and July. If the Prime Rate changes, the increase or decrease of rate will take effect on the 1st day of February and August. If the *Journal* is not published on that day, then see the next publication date. The interest rate will never be more than NCUA's rate ceiling. The rate will not change more than four (4%) percent in any year. Changes in the ANNUAL PERCENTAGE RATE will result in more (or fewer) payments.**Billing Rights:** Information on your rights to dispute transactions and how to exercise those rights is provided in your account agreement.**SIGNATURE(S)**

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: 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 credit card 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 this is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time.

APPLICATION FEE \$15

By signing below I am applying for Joint Credit

X _____ **X** _____
 Applicant Signature Date Co-Applicant Signature Date

TRANSFER OF BALANCE REQUEST

Upon approval, I wish to transfer my present balance on the credit card account(s) listed below to my new credit card account.

 Visa Account No. MasterCard Account No.

Signature _____

*Please provide a copy of your last STATEMENT***FOR INTERNAL USE ONLY**

<u>Visa Account Number</u>	<u>Account Number</u>
<u>Date Approved</u>	<u>Credit Line</u>
	<u>Approved By</u>

VERMILLION FEDERAL CREDIT UNION

Additional Comments:

105 EAST CHERRY STREET

VERMILLION, SD 57069

PHONE: (605) 677-5214

WWW.VERMILLIONFCU.COM

May 1, 2010