

**DANVILLE CITY EMPLOYEES
FEDERAL CREDIT UNION**
320 Old Riverside Dr. • Danville, VA 24541
Phone: (434) 799-5027 • Fax: (434) 797-8910
www.danvillecityfcu.org

A table that includes required credit card disclosures is provided with this Application. To obtain any change in the required information since it was printed, call us collect at (434) 799-5027 or write to us at the address stated on this Application.



Credit Card Application

Check below to indicate 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 maintenance, 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 below. If Co-Borrower is spouse of the applicant, mark the Co-Applicant box.

Guarantor: Complete the **Other** section if you are a guarantor on an account/loan. **Credit Limit Requested:** \$ _____

Applicant				Other: <input type="checkbox"/> Co-Applicant <input type="checkbox"/> Spouse <input type="checkbox"/> Other			
NAME (Last - First - Initial)		ACCOUNT NUMBER		NAME (Last - First - Initial)		ACCOUNT NUMBER	
DRIVER'S LICENSE NUMBER / STATE		SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER / STATE		SOCIAL SECURITY NUMBER	
E-MAIL ADDRESS				E-MAIL ADDRESS			
BIRTH DATE	HOME PHONE	CELL PHONE	BUSINESS PHONE/ EXT.	BIRTH DATE	HOME PHONE	CELL PHONE	BUSINESS PHONE/ EXT.
() () ()	() () ()	() () ()	() () ()	() () ()	() () ()	() () ()	() () ()
PRESENT ADDRESS (Street - City - State - Zip)			<input type="checkbox"/> OWN <input type="checkbox"/> RENT	PRESENT ADDRESS (Street - City - State - Zip)			<input type="checkbox"/> OWN <input type="checkbox"/> RENT
.....			YEARS AT THIS ADDRESS			YEARS AT THIS ADDRESS
MORTGAGE/RENT OWED TO:				MORTGAGE/RENT OWED TO:			
MORTGAGE BALANCE	MONTHLY PAYMENT	INTEREST RATE		MORTGAGE BALANCE	MONTHLY PAYMENT	INTEREST RATE	
\$ _____	\$ _____	%		\$ _____	\$ _____	%	
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:				COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:			
<input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)				<input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)			
Employment/Income			START DATE	Employment/Income			START DATE
NAME AND ADDRESS OF EMPLOYER				NAME AND ADDRESS OF EMPLOYER			
.....						
NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.				NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.			
EMPLOYMENT INCOME		OTHER INCOME		EMPLOYMENT INCOME		OTHER INCOME	
\$ _____ PER _____	\$ _____ PER _____	SOURCE		\$ _____ PER _____	\$ _____ PER _____	SOURCE	
<input type="checkbox"/> NET <input type="checkbox"/> GROSS		SOURCE		<input type="checkbox"/> NET <input type="checkbox"/> GROSS		SOURCE	

State Law Notices **OHIO RESIDENTS ONLY:** The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

WISCONSIN RESIDENTS ONLY: (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened. (2) Please sign if you are not applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.

X _____
SIGNATURE FOR WISCONSIN RESIDENTS ONLY DATE

Signatures

1. 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 crime to willfully and deliberately provide incomplete or incorrect information in this application.

2. You understand that the use of your card will constitute acknowledgment of receipt and agreement to the terms of the credit card agreement and disclosures. 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. When you are in default, you authorize us to apply the balance in these accounts to any amounts due. 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 the security interest you have given in your shares and deposits.

X _____ (SEAL)	X _____ (SEAL)
APPLICANT'S SIGNATURE	DATE
OTHER SIGNATURE	DATE
FOR CREDIT UNION USE ONLY <input type="checkbox"/> APPROVED NO. OF CARDS _____ CREDIT LIMIT \$ _____ CREDIT CARD NUMBER _____	
<input type="checkbox"/> DECLINED CREDIT COMMITTEE OR LOAN OFFICER SIGNATURE _____	



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Application and Solicitation Disclosure

Interest Rates and Interest Charges	
Annual Percentage Rate (APR) for Purchases	6.99% to 9.99% when you open your account, based on your creditworthiness.
APR for Balance Transfers	6.99% to 9.99% when you open your account, based on your creditworthiness.
APR for Cash Advances	6.99% to 9.99% when you open your account, based on your creditworthiness.
Penalty APR and When it Applies	None
How to Avoid Paying Interest on Purchases	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.
For Credit Card Tips from the Consumer Financial Protection Bureau	To learn more about factors to consider when applying for or using a credit card, visit the website of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore.
Fees	
Annual Fee - Annual Fee	None
Transaction Fees - Balance Transfer Fee - Cash Advance Fee - Foreign Transaction Fee - Transaction Fee for Purchases	None None 1.00% of each multiple currency transaction in U.S. dollars 0.80% of each single currency transaction in U.S. dollars None
Penalty Fees - Late Payment Fee - Returned Payment Fee	Up to \$25.00 Up to \$25.00

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

Effective Date:

The information about the costs of the card described in this application is accurate as of July 1, 2015. This information may have changed after that date. To find out what may have changed, contact the Credit Union.

SEE NEXT PAGE for more important information about your account.

OTHER DISCLOSURES

Late Payment Fee	\$25.00 or the amount of the required minimum payment, whichever is less, if you are five or more days late in making a payment.
Returned Payment Fee	\$25.00 or the amount of the required minimum payment, whichever is less.
Statement Copy Fee	\$5.00
Document Copy Fee	\$5.00
Rush Fee	\$25.00
Emergency Card Replacement Fee	\$5.00
Card Replacement Fee	\$5.00
Card Recovery Fee	\$5.00