

Visa 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 the appropriate box below to indicate the type of credit for which you are applying.

Individual credit. Complete Applicant section. Complete other section as follows:
Information about the party making payments only if you are relying on alimony, spousal support, child support, or maintenance as a basis for repayment.

Joint credit. Provide information about both of you by completing Applicant and Co-Applicant sections.

Credit limit requested: \$ _____

Number of cards desired? 1 2

APPLICANT Name		Date of Birth	Home Phone	Mother's Maiden Name	
Street		Social Security Number	Cell Phone	Driver's License Number and State	
City, State, Zip		Email Address		Number of Dependents	Ages
Gross Annual Income \$	Net Monthly Pay \$	Other Income \$		Are you self employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Current Employer		Business Address		Title/Rank/Grade	
Type of Business		Business Phone Number	Supervisor's Phone Number	Start Date	
Previous Employer		Previous Business Address		Title/Rank/Grade	Start Date/End Date
CO-APPLICANT Name		Date of Birth	Home Phone	Mother's Maiden Name	
Street		Social Security Number	Cell Phone	Driver's License Number and State	
City, State, Zip		Email Address		Number of Dependents	Ages
Gross Annual Income \$	Net Monthly Pay \$	Other Income \$		Are you self employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Current Employer		Business Address		Title/Rank/Grade	
Type of Business		Business Phone Number	Supervisor's Phone Number	Start Date	
Previous Employer		Previous Business Address		Title/Rank/Grade	Start Date/End Date

LIST ALL DEBTS. Attach other sheets if necessary.

NOTE: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered.

Debts	Owed to	Address	Account No.	Present Balance	Monthly Payments	Amount Past Due
Mortgage or Rent						
Second Mortgage						
Auto Loan						
Credit Card						
Credit Card						
Child Support, Alimony or Maintenance						
Other						

LIST ALL ASSETS. List all items you own free and clear on another sheet if necessary.

Home <input type="checkbox"/> Own <input type="checkbox"/> Rent	Years there	Estimated Market Value \$	Auto License(s)	Make of Auto 1	Year	Make of Auto 2	Year
Other/Describe	Market Value \$	Other/Describe	Market Value \$	Other/Describe	Market Value \$		
Are you the comaker of any other loans? <input type="checkbox"/> Yes <input type="checkbox"/> No		How much?	For whom?				
Have you ever filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you any legal proceedings against you? <input type="checkbox"/> Yes <input type="checkbox"/> No				

FINANCIAL REFERENCES

Share Draft or Checking Account Number / Amount	Name and address of depository	Phone
Savings Account Number / Amount	Name and address of depository	Phone

PERSONAL REFERENCES

Name and address of nearest relative not living with you	Relationship	Phone
Name and address of a personal friend (not a relative)		Phone

The credit union is relying on what you stated in this application, and you acknowledge that everything you have stated is true and correct and that you have provided a COMPLETE listing of all your debts and obligations. 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.

By signing below, you acknowledge receipt of and agree to the terms of the Visa Credit Card Agreement that was attached to this application when you received it. Detach the Visa Credit Card Agreement and retain it for your records.

Applicant Signature X	Date	Co-Applicant Signature X	Date
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CREDIT UNION USE ONLY Approved Rejected Credit Limit \$ _____ Visa Account Number _____ Member Credit Union Account Number _____
Conditions/Comments _____ Loan Officer _____ Date _____

DETACH AND RETURN THIS APPLICATION TO KSW CREDIT UNION