

Place  
Stamp  
Here

Connection Credit Union  
P.O. Box 3990  
Silverdale, WA 98383



**VISA**

**Credit Card  
Application**



Silverdale **360.307.6400**  
Port Orchard **360.337.7009**  
Bremerton **360.479.1560**  
24 hour Automated Phone **360.337.7024**  
**www.connectioncu.org**  
P.O. Box 3990 • Silverdale, WA 98383

## You Deserve The Credit

Make your new VISA your constant travelling companion and you'll always have instant credit at your fingertips. Your new card is already packed with everything you need, to take with you anywhere you want to go. From the tiniest boutique to the largest resort, your VISA is your ticket to the best.

You'll enjoy more shopping, more fine restaurants, and more travel opportunities with your VISA, whether you're going across town or around the world.

Accepted around the globe wherever you see the VISA emblem. You'll benefit from its convenience and security whenever you use your card to travel, shop, or dine. In business or pleasure, you'll find it makes your life a little bit easier.

## FACTA Information

This notice is being provided to you as required by the Fair and Accurate Credit Transactions Act.

Your credit report provides a glimpse of how financially responsible you are. Maintaining a clean credit report is vital to your financial well being. Negative information in your credit report will lower your credit score. Your credit score can be reviewed by lenders, insurers, landlords and even potential employers. With a low credit score, you will more likely be denied future credit, be offered lower credit limits, and pay higher rates on the credit you do receive.

## We May Furnish Negative Information to Consumer Reporting Agencies

We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

Please make your payments on time and always pay at least the minimum amount due to assure that negative information regarding your accounts with us will not appear on your credit report.





# CCU Account Number

Account Choice  
(Check only one)  
 Individual Account  
 Joint Account  
 Credit Limit Increase

# VISA CREDIT APPLICATION

All applicants must include a recent  
paystub or income verification.

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

Applicant Note: All applicable sections should be filled out completely to avoid delays in processing your application. Amount of credit extended and current credit score determine type of account (Platinum or Classic).

Applicant

Last Name	First	Middle	SSN
Date of Birth	No. of Dependents	Home Phone	Monthly Payment \$
Current Address	City	State	Zip Code
Previous Address	City	State	Zip Code
Employer	Address	Self Employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Work Phone
Address	Position/Occupation	Monthly Gross Income \$	How Long (yrs.)

Co-Applicant

Last Name	First	Middle	Social Security Number
Date of Birth	No. of Dependents	Home Phone	Monthly Payment \$
Employer	Address	Self Employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Work Phone
Address	Position/Occupation	Monthly Gross Income \$	How Long (yrs.)

Creditor	Name and address of creditor	Name under which account is carried	Account Number	Balance	Monthly Payment
1. Automobile					
2. Home Mortgage					
3. Bank Credit Card Bank Name and Address					
Other					

INTEREST RATES AND INTEREST CHARGES		FEES	
Fixed Annual Percentage Rate (APR) for Purchases & Balance Transfers	<b>8.90%</b> Visa Platinum <b>13.50%</b> Visa Classic	Annual fee: None	Balance Transfer Fee: None
Other APRs	<b>8.90%</b> Visa Platinum Balance transfer APR and Cash advance APR <b>13.50%</b> Visa Classic Balance transfer APR and Cash advance APR	Late Payment Fee: \$15.00 If the minimum required payment is not received within 10 days after the Closing Date subsequent to the payment Due Date, a late charge of \$15.00 will be imposed.	(4) A finance charge will be imposed on Credit Purchases only if you elect not to pay the entire new balance shown on your monthly statement for the previous billing cycle within 25 days from the closing date of that statement. If you elect not to pay the entire new balance shown on your previous monthly statement within that 25-day period, a finance charge will be imposed on the unpaid average daily balance of such Credit Purchases from the previous statement closing date and on new Credit Purchases from the date of posting to your account during the current billing cycle, and will continue to accrue until the closing date of the billing cycle preceding the date on which the entire new balance is paid in full or until the date of payment if more than 25 days from the closing date. The finance charge for a billing cycle is computed by applying the monthly periodic rate to the average daily balance of Credit Purchases, which is determined by dividing the sum of the daily balances during the billing cycle by the number of days in the cycle. Each daily balance of Credit Purchases is determined by adding to the outstanding unpaid balance of Credit Purchases at the beginning of the billing cycle any new Credit Purchases posted to your account, but excluding any unpaid finance charges. A finance charge will be imposed on Cash Advances from the date made or from the first day of the billing cycle in which the Cash Advance is posted to your account, whichever is later, and will continue to accrue until the date of payment. Balance transfers are treated as Cash Advances for finance charge computing purposes.
Period for repayment of balance purchases	25 days on average*	Annual Fee: None	Returned Payment Fee: \$15
Method for computing the balance for purchases	Average daily balance* Including new purchases	Over-The-Credit-Limit Fee: None	Cash Advance Fee: None
			Balance Transfer Fee: None
			International Transaction Fee: None

**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 bank 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.

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 send a copy of your last STATEMENT.

## For Internal Use Only

Visa Account No.	Date Approved	Credit Line	Approved By
------------------	---------------	-------------	-------------