

Dawson Co-op Credit Union

PO Box 1002, Dawson MN 56232 Ph:320-769-2908 Fax: 320-769-2431 Boyd Branch: PO Box 245 Boyd MN 56218 PH: 320-855-9900 Renville Branch: PO Box 585, Renville MN 56284 PH:320-329-3152

Fergus Falls Branch: 413 W Stanton Ave, Fergus Falls MN 56537 PH: 218-736-5528

CREDIT CARD

APPLICATION ACCOUNT NUMBER Married persons may apply for an individual account. IMPORTANT: READ THIS SECTION CAREFULLY BEFORE CHECKING THE APPROPRIATE BOX(ES). INDIVIDUAL ACCOUNT. Complete the "Borrower" sections. Complete information about your spouse (Co-Maker/Non-Applicant Co-Borrower" section) if you live in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI), or if your spouse will use the Account, or information about the person making payments if you are relying on alimony, spousal support, child support or separate maintenance as a basis for repayment of the credit requested. JOINT ACCOUNT. Complete all sections with information about you and your Other Applicant. Please check the Joint Account box to show your intent. CREDIT CARD REQUEST THIS ACCOUNT IS TO BE FOR: INDIVIDUAL ACCOUNT INDIVIDUAL ACCOUNT REQUESTED LIMIT JOINT ACCOUNT We intend to apply for joint credit With authorized user **BORROWER INFORMATION** Co-Maker/Non-Applicant Co-Borrower Borrower Borrower's Name (Last, First, Middle, include Sr./Jr, if applicable) Co-Borrower's Name (Last, First, Middle, include Sr./Jr. if applicable) Current Address (Street, City, State, Zip) Own Rent Current Address (Street, City, State, Zip) Own Rent No. of Years No. of Years Pmt Amt:: Pmt Amt:: Home Telephone Number Mother's Maiden Social Security Number Date of Birth Home Telephone Number Mother's Maiden Social Security Number Date of Birth Complete for joint, secured credit or if you live in a Driver's License No./State Complete for joint, secured credit or if you live in a No. of Dependants Driver's License No./State No. of Depend. erty state UNMARRIED SEPARATED MARRIED UNMARRIED SEPARATED (Excluding self) (Excluding self) MARRIED Former Address (Street, City, State, Zip, Country) Former Address (Street, City, State, Zip, Country) No. of Years No. of Years Co-Maker/Non-Applicant Co-Borrower Borrower EMPLOYMENT INFORMATION Employer Employer Address (Street, City, State, Zip) Address (Street, City, State, Zip) Position or Job Title Supervisor Position or Job Title Supervisor Hire Date Telephone Number Hire Date Monthly Salary Telephone Number Monthly Salary Former Employer Former Employer Address (Street, City, State, Zip) Address (Street, City, State, Zip) Position or Job Title Supervisor Position or Job Title Supervisor Telephone Number Hire Date **Ending Date** Telephone Number Hire Date **Ending Date** Co-Maker/Non-Applicant Co-Borrower OTHER INCOME Borrower You need not list income from alimony, child support or separate maintenance unless you wish it considered for purposes of granting this credit. Type of Other Income Monthly Amount Type of Income Monthly Amount

Type of Other Income

Is any income likely to be reduced before the credit requested is paid off?

Is any income likely to be reduced before the credit

Monthly Amount

YES

NO

Type of Other Income

requested is paid off?

Monthly Amount

YES

	ASSETS AND LIABILITIES								
	PLEASE CHECK BOX A IF THE ASSET/DEBT IS IN BORROWER'S NAME ONLY. PLEASE CHECK BOX B IF THE ASSET/DEBT IS IN CO-BORROWER'S/OTHER PERSON'S NAME ONLY.								
ASSETS:									
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Address of Relative (Street, City, State, Zip)				16	Telephone Number			Address of Relative (Street, City, State, Zip)				Telephone Number				
Personal Reference (Not Related)				Te	Telephone Number			Personal Reference (Not Related)				Telephone Number				
Add	ess	of Pe	ersonal Reference (Street	t, City, State, Zip)					Address of Pers	onal R	teference (St	reet, City, State, Zip)				
			D				QUESTIONS IF A "YES" ANSWER IS GIVEN TO A QUESTION, PL			A CHECTION DI FACE	ASE Borrower			Co Borrower		
			Borro Yes	No No	Yes	No No	EXPLAIN ON AN ATTACHED SHEET.				Yes	No No	Co-Borrower Yes No			
Have you ever filed a petition for Chapter 13?								Have you ever had any auto, furniture or other property repossessed?								
Have you filed for bankruptcy within the last 10 years?							Do you have any past due bills?									
Are there any suits pending, judgments unsatisfied, alimony or maintenance awards against you?							Are you a US Ci									
Have you ever applied for credit using another name? List other names								Are you a co-maker, endorser, or guarantor on any note?			uarantor on any loan or					
LIST	otner	nam	ies						If Yes, list name	and a	mount.					
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X Borro	wer'	s Sig	nature				Dat	е	X Other Signature	e (if ap	plicable)					Date
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Credit Card Account #_ except as to the following: (list any changes in amount, terms or conditions below) _ was approved on the conditions requested by the borrower Interviewed by: _ Credit Committee or Loan Officer:_ © CU Documents, Inc., 2017, ALL RIGHTS RESERVED VISAAPP #001 1/17

Interest Rates and Interest Charges							
Annual Percentage Rate (APR) for Purchases	6.90%						
APR for Balance Transfers	6.90%						
APR for Cash Advances	6.90%						
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.						
Minimum Interest Charge	If you are charged interest, there is no minimum interest charge.						
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: www.consumerfinance.gov/learnmore						

Fees	
Annual Fee	None
Application Fee	None
Transaction Fees	
 Balance Transfer 	None
 Cash Advance 	\$1.00
 Foreign Transaction 	1% of each multiple currency transaction in U.S. dollars.
	1% of each single currency transaction in U.S. dollars.
Penalty Fees	
 Late Payment 	Up to \$15.00
 Over Credit Limit 	None
 Returned Payment 	Up to \$20.00
Other Fees	
 Statement Copy Fee 	\$2.00
Rush Fee	\$15.00
 Emergency Card 	\$150.00
Replacement Fee	
 Card Replacement 	\$15.00
Fee	

How we will calculate your balance: We use the method called "average daily balance (including new purchases)." See your account agreement for more details.

Other Disclosures

<u>Late Payment:</u> \$15.00 or the minimum payment due, whichever is less, for payments 5 days or more past due

from the due date disclosed on your billing statement.

Returned Payment: \$20.00 or the minimum payment due, whichever is less.

Statement Copy Fee: \$2.00 Rush Fee: \$15.00

Emergency Card

Replacement Fee: \$150.00

Card Replacement

Fee: \$15.00