

# Platinum Credit Card Application

Please print in ink



Share Savings Account Number \_\_\_\_\_

## PLEASE COMPLETE THIS AREA

I/We wish to apply for:	<input type="checkbox"/> Platinum Visa	<input type="checkbox"/> Platinum MasterCard
<b>\$5,000 Minimum</b>	\$ _____ Limit Desired	\$ _____ Limit Desired
<b>For Existing Credit Card Users Only</b>		
Increase credit limit on present Platinum Visa/MasterCard	\$ _____ Limit Desired	
Platinum Credit Card Number _____		

APPLICANT	APPLICANT'S FULL NAME			BIRTH DATE	SOCIAL SECURITY NO.		HOME PHONE NO. / AREA CODE	
	ADDRESS			CITY	STATE	ZIP	TIME AT ADDRESS (YRS.)	
	CELL PHONE	E-MAIL		<input type="checkbox"/> BUY <input type="checkbox"/> RENT <input type="checkbox"/> OWN <input type="checkbox"/> MOBILE HOME	MORTGAGE HOLDER OR LANDLORD		MONTHLY PMT.	
	NAME OF EMPLOYER			DATE HIRED	POSITION	WORK PHONE NO. / AREA CODE		NET MONTHLY INCOME \$
	PREVIOUS EMPLOYER NAME (IF LESS THAN 5 YEARS AT CURRENT EMPLOYER)			YEARS THERE	POSITION	COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU RESIDE IN A COMMUNITY PROPERTY STATE: (AZ, CA, ID, LA, NM, NV, TX, WA, WI)		MARRIED UNMARRIED SEPARATED
	OTHER INCOME (EXCLUDE ALIMONY, CHILD SUPPORT AND MAINTENANCE PAYMENTS) \$			SOURCE		HAVE YOU EVER FILED BANKRUPTCY? <input type="checkbox"/> YES <input type="checkbox"/> NO DATE(S)		HAVE YOU ANY LEGAL PROCEEDINGS PENDING AGAINST YOU? <input type="checkbox"/> YES <input type="checkbox"/> NO
	NAME OF NEAREST RELATIVE NOT LIVING WITH YOU (COMPLETE ADDRESS)					PHONE NO. / AREA CODE	RELATIONSHIP	

CO-APPLICANT	JOINT APPLICANT MUST COMPLETE. WE INTEND TO APPLY FOR JOINT CREDIT: (PLEASE INITIAL) _____ APPLICANT _____ CO-APPLICANT								
	CO-APPLICANT'S FULL NAME			BIRTH DATE	SOCIAL SECURITY NO.		BEST PHONE NUMBER TO CALL / AREA CODE		
	ADDRESS			CITY	STATE	ZIP	TIME AT ADDRESS (YRS.)		
	NAME OF EMPLOYER			DATE HIRED	POSITION	WORK PHONE NO. / AREA CODE		NET MONTHLY INCOME \$	
	PREVIOUS EMPLOYER (IF LESS THAN 5 YEARS AT CURRENT EMPLOYER)			YEARS THERE	POSITION	HAS CO-APPLICANT EVER FILED BANKRUPTCY? <input type="checkbox"/> YES <input type="checkbox"/> NO DATE(S)			

You are not required to disclose income from alimony, child support or maintenance payments. However, if you are relying on income from alimony, child support or maintenance payments as a basis for repayment of this obligation, please complete below.

PAYER	AMOUNT \$	<input type="checkbox"/> ALIMONY <input type="checkbox"/> CHILD SUPPORT	<input type="checkbox"/> SEPARATE MAINTENANCE	YEARS	CURRENT FOR LAST SIX MONTHS <input type="checkbox"/> YES <input type="checkbox"/> NO
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I/We hereby apply for a Platinum Visa/MasterCard Line of Credit Loan. The above statements are submitted for the purpose of obtaining credit. I/We certify that they are true, complete and correct. I/We understand that the Credit Union will retain this application whether or not it is approved. You are authorized to check my/our credit and employment to verify any statements made herein. Each person signing this application agrees to be jointly and severally responsible for payment of this Account. I/We are members of the Credit Union and have read the Platinum Visa/MasterCard credit card AGREEMENT/TRUTH-IN-LENDING DISCLOSURE. I/We have detached the Platinum Visa/MasterCard AGREEMENT/TRUTH-IN-LENDING DISCLOSURE and retained it as my/our copy. By signing here, I/We agree to all the terms and conditions of the Platinum Visa/MasterCard AGREEMENT/TRUTH-IN-LENDING DISCLOSURE and acknowledge receipt of the Federal Equal Credit Opportunity Act Notice and Billing Rights Notice. I/We understand and agree that the closing of my/our Credit Union Share Savings Account terminates my/our status as members of the Credit Union, and upon such closing I/We can no longer obtain credit with the Credit Union Platinum Visa/MasterCard.

**X** Signature of Applicant \_\_\_\_\_ Acct # \_\_\_\_\_ Date \_\_\_\_\_

**X** Signature of Co-Applicant \_\_\_\_\_ Acct # \_\_\_\_\_ Date \_\_\_\_\_

How many cards would you like to be issued? \_\_\_\_\_ (NO CARD WILL BE ISSUED IN THE NAME OF A PERSON WHO HAS NOT SIGNED THIS APPLICATION)

1. \_\_\_\_\_  
Print Name
2. \_\_\_\_\_  
Print Name

FOR CREDIT UNION USE ONLY	
APPROVED _____	DATE _____ / _____ / _____
CREDIT LIMIT	
Platinum Visa \$ _____	Platinum MasterCard \$ _____

## Balance Transfer Form

Balances you have on high-interest credit cards can be costing you much more than necessary. You can save money by transferring your current balances to your new ECCU Platinum Visa or MasterCard. To transfer balances, complete the form below and return it with the attached application. We will handle the details for you.

(Please Print)

Card Issuer _____	Card Issuer _____
Payment Address _____	Payment Address _____
City/State/Zip _____	City/State/Zip _____
Account # _____	Account # _____
Amount To Pay \$ _____	Amount To Pay \$ _____

Your balance transfer request will not be processed until your Platinum Visa or MasterCard Account is opened. Total balance transfers cannot exceed your approved Platinum Visa or Mastercard limit. Please allow at least two to three weeks for the opening of your Account and for other credit card(s) to be credited. You may still need to make a payment on your other credit card account(s) to keep current, even if you transfer the total amount due. Educational Community Credit Union is not responsible for any additional charges or fees assessed by your other credit card account(s), nor is Educational Community Credit Union responsible for payments that are late or lost in the mail. Transfer of a balance which contains disputed charges may cause you to lose your rights with regard to those charges. Balance transfers are treated as cash advances and will accrue finance charges from the date that the advance was disbursed. Confirmation on any advance will be sent to you for your records.

**X** SIGNATURE \_\_\_\_\_

**PLATINUM VISA/MASTERCARD CREDIT CARD APPLICATION-AGREEMENT AND TRUTH-IN-LENDING DISCLOSURE STATEMENT**

ANNUAL PERCENTAGE RATE (APR)	GRACE PERIOD	INTERNATIONAL TRANSACTION FEE	LATE PAYMENT FEE	OTHER CHARGES
<b>9.9%</b> FIXED APR	YOU HAVE 25 DAYS ON PURCHASES FROM THE END OF THE STATEMENT CLOSING DATE TO PAY YOUR BALANCE BEFORE BEING CHARGED A FINANCE CHARGE.	1% OF THE TRANSACTION AMOUNT.	IF A PAYMENT IS 10 DAYS OR MORE LATE, WE MAY CHARGE YOU A LATE FEE OF \$25.	MINIMUM FINANCE CHARGE — NONE
		<b>OTHER APRs</b>	<b>OVER-THE-LIMIT FEE</b>	TRANSACTION FEE FOR PURCHASES — NONE
<b>VARIABLE RATE INFORMATION</b>		BALANCE TRANSFER 9.9%	A \$20 FEE MAY BE CHARGED FOR EACH STATEMENT CYCLE IN WHICH THE NEW BALANCE REFLECTED ON YOUR STATEMENT EXCEEDS YOUR CREDIT LIMIT.	TRANSACTION FEE FOR CASH ADVANCES — NONE
NON-APPLICABLE		CASH ADVANCE 9.9%		BALANCE TRANSFER FEE — NONE
				ANNUAL FEE — NONE

**METHOD OF COMPUTING THE BALANCE FOR PURCHASES**

**AVERAGE DAILY BALANCE METHOD (INCLUDING CURRENT TRANSACTIONS)**

We figure (a portion of) the FINANCE CHARGES on your Account by applying the periodic rate to the "average daily balance" of your Account (including current transactions). To get the "average daily balance," we take the beginning balance of your Account each day, add any new (purchases/advances/loans), and subtract any payments or credits (and unpaid finance charges). This gives us the daily balance. Then we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle. This gives us the "average daily balance."

In this application-agreement (called the "Agreement"), the words "you" and "your" mean or refer to each and all persons who have applied for the Card or Cards by signing this Agreement. "Card" means the Platinum Visa/MasterCard Credit Card or Cards and any duplicates and renewals thereof or substitutions thereof we may issue. "Account" means your Platinum Visa/MasterCard Credit Card line of credit loan account with us. "We," "us" and "ours" means or refers to this Credit Union. This Agreement is a Truth-in-Lending Disclosure Statement as well as a contract.

**1. Responsibility** – By signing this Agreement, you are applying to us for a Platinum Visa/MasterCard Credit Card line of credit loan. If we approve the loan and issue you a Card, you promise to repay all debts and the finance charges thereon arising from any authorized use of the Card. You agree not to let anyone else use the Card, other than the person(s) that you have designated in writing to us as an "authorized user." You are agreeing with us that you authorize any and all uses such authorized user makes of the Card, whether or not such use was within the authority (actual, apparent or implied) that you gave that person in connection with the Card or otherwise. Therefore, you will be liable for all such use of the Card. Of course, once you notify us, we will take prompt steps to try to prevent any further Card use by that person. If this Agreement is signed by two persons, the Account is joint; that is, each of you, separately and jointly with each other, is liable for all debts on the Account and FINANCE CHARGES thereon. Your obligation to pay all such debts and FINANCE CHARGES thereon continues even though an agreement, divorce decree or other court judgment to which we are not a party may direct that only one of you, or some person other than you (or both of you), must pay such debts and FINANCE CHARGES.

**2. Credit Line** – If we approve your loan application, we will establish a self-replenishing line of credit for you and will notify you of the amount thereof ("credit limit") in the mailer in which we will send you your Card. That mailer is hereby incorporated herein as part of this Agreement. You agree not to let your Account Balance exceed such amount. Each payment you make on the Account will replenish your credit limit by the part of that payment which is applied to principal. You may request an increase in the credit limit by a written application, which must be approved by us. We may increase or decrease the limit from time to time or may, with good cause, revoke your Card and terminate this Agreement; in either event, we will give you written notice of such action. "Good Cause" includes your failure to satisfy the terms of this Agreement or our adverse re-evaluation of your credit worthiness. You may terminate this Agreement, at any time and for any reason, by giving us written notice. Nevertheless, termination by you or by us does not affect your obligation to pay all debts and FINANCE CHARGES thereon arising from authorized use of your Card. The Cards remain our property and you must recover and surrender to us all Cards upon our request or upon termination of this Agreement.

**3. Using the Card** – We will send you a Card or Cards embossed as you have directed. As soon as received, each Card must be signed (in the space provided on the back) by the person whose name is embossed thereon. That signature must be in the same form as embossed on the front of the Card. To make a purchase or Cash Advance, present the Card to a participating Visa/MasterCard-plan merchant or financial institution, or to us, and sign the sales draft or cash advance draft which will be imprinted with your Card. Please note that we are not responsible if a particular Visa/MasterCard-plan merchant or financial institution refuses to honor your Card. You will receive a copy of any draft you sign when using the Card which you should retain to verify your monthly statement. We will upon request furnish you

with a copy of a draft at a charge of \$5.00 per copy; however, no charge will be made in cases covered by Sec. 226.13 (F) (2) of the regulation (i.e., Regulation Z) issued under the Truth-in-Lending Act. You agree not to make or permit to be made any illegal transactions on your Account through use of a Card, a check, or in any other manner. We may deny authorization for any Internet gambling transaction.

**4. Monthly Payment** – We will mail you a statement every month showing your Previous Balance of purchases and cash advances, the current transactions on your Account, the remaining credit available under your Credit Line, the New Balance of purchases and cash advances, the Total New Balance, the FINANCE CHARGES due to date, and the Minimum Payment required. Every month you must pay the Minimum Payment within 25 days of your statement closing date. You may, of course, pay more frequently, pay more than the Minimum Payment, or pay the Total New Balance in full; and you will reduce your FINANCE CHARGES by doing so. The Minimum Payment will be either (a) 3% of your Total New Balance, or \$10.00, whichever is greater; or (b) your Total New Balance, if it is less than \$10.00 plus (c) any portion of the Minimum Payment(s) shown on prior statement(s) which remains unpaid. In addition, at any time your Total New Balance exceeds your Credit Line, you must immediately pay the excess upon our demand. We will apply your payments first to previously billed and unpaid FINANCE CHARGES on purchases; then to previously billed and unpaid FINANCE CHARGES on cash advances; then to previously billed purchases; then to cash advances; and then to new purchases, whether or not billed on the monthly statement. However, any payment equal to, or greater than, the Previous Balance of Purchases will be applied first to that balance and any FINANCE CHARGES thereon so as to avoid continuing accrual of FINANCE CHARGES on that amount.

**5. Finance Charges** – The FINANCE CHARGES hereunder may be increased pursuant to paragraph 9 on the reverse side, only if you engage in foreign transactions. Your Account will be subject to FINANCE CHARGES (interest) at the periodic rate of .826% per month, which corresponds to an ANNUAL PERCENTAGE RATE of 9.9%. The FINANCE CHARGES are calculated by applying the above periodic (monthly) rate to the Average Daily Balance (including new purchases). An "Average Daily Principal Balance" is calculated separately for purchases and cash advances and is determined as follows: For each day during the statement period (billing cycle) the principal balances of purchases and of cash advances from the previous day are increased by any purchases or cash advances posted to the Account that day and decreased by any payments or credits posted to the Account that day. Such daily principal balances are separately totaled and then divided by the number of days in the statement period (billing cycle) resulting in the "Average Daily Principal Balances" of purchases and cash advances shown on your statement.

You can avoid FINANCE CHARGES on purchases by paying the full amount of the New Balance of Purchases each month within 25 days of your statement closing date. Otherwise, the New Balance of Purchases, and subsequent purchases from the date they are posted to your Account, will be subject to FINANCE CHARGES. Cash Advances bear FINANCE CHARGES from the date of posting to the Account until paid. There is no FREE INTEREST period for Cash Advances. However, you can always keep the FINANCE CHARGES to a minimum by making payments, whatever the amount, as promptly and as often as possible.

**6. Other Charges** – If your Account balance exceeds your credit limit, the Credit Union may treat your Account as being in default under the "Default" provisions of the Agreement and demand payment in full. If the Credit Union chooses not to demand payment in full in such a

situation, it will impose an OVER-THE-CREDIT-LIMIT FEE OF \$20.00 for each statement cycle in which the New Balance reflected on your statement exceeds your credit limit. The Credit Union will begin imposing this fee when your Account balance exceeds your credit limit. The fee will be imposed each statement cycle until your Account balance falls below your credit limit.

If the required minimum payment due under this Agreement is not paid within 10 days after the payment due date, you must pay the Credit Union a LATE CHARGE OF \$25.00. No late charge will be imposed after this Agreement has become due and payable in full due to default as specified in the section of the Agreement entitled "Default."

Your Account may be subject to other charges including a fee of \$5.00 for the replacement of card(s) and a statement copy fee of \$1.00 per page.\*

A charge of \$25.00 will be billed to your Account for any check made payable to your Account and returned due to non-sufficient funds. A charge of \$5.00 will also be billed to your Account for a Personal Identification Number (PIN) replacement.\*

\* SUBJECT TO CHANGE.

**7. Credits** – If merchants who honor your Card give you a credit for returns or adjustments, they will do so by sending us a credit slip which we will post to your Account. You should keep your copy of the credit slip to verify your monthly statement. If your credits and payments exceed what you owe us on the Account, we will credit such excess to the Account and, if the amount is \$1.00 or more, we will credit it to your Share Savings Account after 6 months or upon your written request.

**8. Waiver of Security** – Regardless of anything contained in any other loan document you have previously signed, we hereby expressly waive any security interest, or pledge of shares or deposits, as security for balances owing on this Account.

**9. International Transactions** – Purchases and Cash Advances you make in foreign countries and foreign currency will be billed to you in U.S. dollars. The conversion to U.S. dollars will be calculated based on a government-mandated rate in effect one day prior to the Processing Date increased by one percent.

**10. Loss or Theft of Card** – You agree to notify us immediately upon discovering that your Card has been lost or stolen. Call 1-800-325-3678.

**11. Liability for Unauthorized Use** – You understand that your total liability to the Credit Union shall not exceed \$50.00 for any Card transactions resulting from the loss, theft or other unauthorized use of the Card that occurs prior to the time you give notice to the Credit Union.

**12. Default** – The Minimum Payment shown on the statement is due by the payment due date as shown on the statement. You will be in default if you fail to make the minimum payment by the statement payment due date. You will also be in default if (a) you breach any other conditions of the Agreement, (b) if we determine that your creditworthiness (which includes your ability to

repay us) has become unsatisfactory due to change in employment, increase in your other obligations, or because of any other reason, or (c) in the event of your death. In the event of any default or in the event this Agreement is terminated by you or by us for any reason, the entire balance on the Account becomes due and payable forthwith. You also agree that, in case of default, you will pay all usual and customary costs of collection permitted by law, including, but not limited to, attorney fees and expenses incurred by us in the enforcement of this Agreement.

**13. Credit Information** – You authorize us to investigate your credit standing when opening, renewing or reviewing your Account, and you authorize us to disclose information regarding our experience with you under this Agreement to credit bureaus and other creditors.

**14. Effect of Agreement** – This Agreement contains our complete contract relating to the Account and applies to every transaction relating to the Account even though a sales or cash advance draft you sign or a credit slip may contain different terms.

**15. Amendment of Agreement** – From time to time, we may amend this Agreement by giving you written notice of the amendment at least 15 days before it goes into effect, unless a shorter notice period is permitted by law. The notice will be sent to your last known address appearing in our records when it is sent, and will state the date upon which the amendment will become effective.

**16. Cash Advance by Machine** – If Automated Teller Machines (ATMs) or other electronic devices are available while this Agreement remains in effect which make it possible for you to obtain a Cash Advance by use of your Card in such a machine, we will furnish you with a confidential PIN. Your use of that number, together with your Card, in getting a Cash Advance from such a machine is agreed to constitute your signature for purposes of such Cash Advance.

**17. Personal Identification Number (PIN)** – Upon request, we will furnish you with a Personal Identification Number (PIN). You agree to keep your PIN confidential. You also agree you won't write the PIN on the Card or anything you keep with the Card. Your use of the PIN and Card in getting a Cash Advance or making a purchase is agreed to constitute your signature for purposes of such transactions. You can also use your card, together with your Personal identification Number (PIN), to get a Cash Advance from an Automated Teller Machine (ATM) in the Visa Network or MasterCard Network, to get a Cash Advance from a Visa/MasterCard financial institution or to make a purchase from a merchant that uses the Card in an electronic terminal that accesses the Visa/MasterCard system.

**18. Record Keeping** – You hereby agree that we may keep the portion of this Agreement that bears your signature so that we can comply with federal and/or state laws as relating to loan documents we are required to keep in our files.

**19. Credit Union Membership** – You understand and agree that the closing of your Credit Union Share Savings Account terminates your status as a member of the Credit Union, and upon such closing, you can no longer obtain credit with the Credit Union Platinum Visa or MasterCard.

## YOUR BILL OF RIGHTS — KEEP THIS FOR FUTURE USE

This notice contains important information about your rights and our responsibilities under the Fair Credit Billing Act.

### **Notify Us in Case of Errors or Questions About Your Bill.**

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us on a separate sheet at the address listed on your bill. Write to us as soon as possible. We must hear from you no later than 60 days after we sent you the first bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights.

In your letter, give us the following information:

- Your name and Account number.
- The dollar amount of the suspected error.
- Describe the error and explain why you believe it to be an error. If you need more information, describe the item you are not sure about.

If you have authorized us to pay your credit card bill automatically from your savings or checking account, you can stop the payment on any amount you think is wrong. To stop the payment, your letter must reach us three business days before the automatic payment is scheduled to occur.

### **Your Rights and Our Responsibilities After We Receive Your Written Notice.**

We must acknowledge your letter within 30 days, unless we have corrected the error by then. Within 90 days, we must either correct the error or explain why we believe the bill was correct.

After we receive your letter, we cannot try to collect any amount you question, or report you as delinquent. We can continue to bill you for the amount you question, including FINANCE CHARGES, and we can apply any unpaid amount against your credit limit. You do not have to pay any disputed amount while we are investigating, but you are still obligated to pay the amount of your bill that is not in question.

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The agency that administers compliance with this law concerning this Credit Union is:

Office of Financial and Insurance Services  
P.O. Box 30220  
Lansing, MI 48909-7720

If we find that we made a mistake on your bill, you will not have to pay any FINANCE CHARGES related to any disputed amount. If we didn't make a mistake, you may have to pay FINANCE CHARGES, and you will have to make up any missed payments on the disputed amount. In either case, we will send you a statement of the amount you owe and the date that it is due.

If you fail to pay the amount that we think you owe, we may report your Account as delinquent. However, if our explanation does not satisfy you, and you write us within ten days telling us that you still refuse to pay, we must tell anyone we report you to that you have disputed your bill. We must tell you the name of anyone we report you to, and we must tell anyone we report you to that the matter has been settled when it finally is.

If we don't follow these rules, we can't collect the first \$50.00 of the questioned amount, even if your bill was correct.

### **Special Rule on Credit Card Purchases.**

If you have a problem with the quality of property or services that you purchased with a credit card, and you have tried in good faith to correct the problem with the merchant, you may have the right not to pay the remaining amount due on the property or services. There are two limitations to this right:

- (a) You must have made the purchase in your home state or, if not within your home state, within 100 miles of your current mailing address, and
- (b) The purchase price must have been more than \$50.00.

These limitations do not apply if we own or operate the merchant, or if we mailed you the advertisement for the property or services.