

VISA CREDIT CARD APPLICATION

Allied Plastics Federal Credit Union
P. O. Box 53006
Baton Rouge, LA 70892-3006
Phone: (225) 775-1082
Fax: (225) 775-1151

For Credit Union Use Only: [] Approved [] Rejected
Date: _____
By: _____
Reviewed By: _____
Credit Limit: _____ APR _____

NOTICE TO MARRIED APPLICANTS: YOU HAVE THE RIGHT TO APPLY FOR A SEPARATE ACCOUNT IN YOUR NAME. I hereby apply to Allied Plastics Federal Credit Union for a Credit Card Line of Credit which will authorize me to a credit limit of \$ _____.

Account Number: _____

Name: _____ Date of Birth: _____

Address: _____ Home Phone: _____

City: _____ State: _____ Zip: _____ Work Phone: _____

Cell Phone: _____ Pager: _____ Other #: _____

Driver's License: _____ Social Security #: _____

Spouse Name: _____ Date of Birth: _____

Spouse License: _____ Social Security #: _____

Marital Status (Circle One): Unmarried, Married, Separated Number of Dependents (not counting yourself): _____

EMPLOYMENT:

Employer's Name: _____ How long employed: _____

Monthly Salary: _____ / _____ Position/Title: _____
(Gross) (Take Home)

OTHER INCOME (if any):

Source: _____ Amount: _____

SPOUSE INFORMATION:

Spouse Employer: _____ How long employed: _____

Monthly Salary: _____ / _____ Work Phone: _____

- Alimony, child support, or separated maintenance income does not have to be revealed if you do not wish to have it considered as a basis for repaying this loan.

PREVIOUS EMPLOYMENT (IF EMPLOYED BY YOUR PRESENT EMPLOYER FOR LESS THAN 2 (TWO) YEARS, PLEASE COMPLETE):

Previous Employer's Name: _____ How long there _____

REFERENCES:

Relative's Name: _____ Address: _____ Phone: _____

Friend's Name: _____ Address: _____ Phone: _____

PERSONAL FINANCIAL INFORMATION (List Checking and/or Savings Accounts at other institutions):

Where: _____ Type of Account: _____ Balance: _____

Where: _____ Type of Account: _____ Balance: _____

OUTSTANDING DEBTS (Please list everything you owe)

	Creditor Balance	Present Payment	Monthly Yes/No	Past Due
Rent/House Note				
Auto Loan				
Other Debt				
Other Debt				
Other Debt				
Other Debt				
Other Debt				

Are you a cosigner or co-maker on any loans other than your own? _____ Yes _____ No If yes, who are you cosigned for? (Name) _____ List and indicate all those debts above.

Have you declared bankruptcy in the last 14 years? _____ Yes _____ No If yes, when? _____

Do you own an automobile, if so what Year _____ Make _____ Model _____
 Year _____ Make _____ Model _____

I desire and certify that this loan and all advances made hereunder will be for provident and productive purposes. I certify that I understand all the conditions specified in the loan application and VISA CARD Agreement and will abide by the terms therein. By executing this application, I agree to accept the terms of both these agreements. I also certify that all statements made are true, complete and submitted for the purpose of obtaining a loan.

I understand that knowingly making false statements or willfully over-valuing any land, property or security for the purpose of influencing the action of a Federal Credit Union is a crime, in violation of Section 1014, Title 18, United States code.

In addition to the card(s) that will be issued to the applicant (and co-applicant, if any) I hereby request that

_____ Name _____ relationship, if any _____

Be an authorized user and that _____ additional card(s) be issued.

_____ Applicants Signature _____ Date _____

_____ Spouse or Co-Applicants Signature _____ Date _____

Annual percentage rate for purchases/cash advances	7.75% - 13.75% Based on Credit Score
Grace period for repayment of balances for purchases	You have 25 days to repay your balance for purchases before being charged a finance charge
Annual Fees	NONE
Minimum Finance Charge	NONE
Transaction fee for purchases	NONE
Transaction fee for cash advances	Transaction Fee for Cash Advances – 1% of amount of each cash advance.
Late Payment Fee	\$25.00