Credit Union Ad	vantage VISA Application	PLEASE PRINT	ACCOUNT #		LIMIT R	requested \$	
Please tell us about y	ourself						
	<ul> <li>icating the type of credit you a <ul> <li>(1) Provide applicant information i</li> <li>(2) Provide information about you in a community property state support, or separate maintena</li> </ul> </li> </ul>	if you are relying o Ir spouse or forme (AZ, CA, ID, LA, N	only on your own ir r spouse in the line M, NV, TX, WA, WI)	es provided for co	o-applicant, if	you reside	
□ Joint Credit	<ol> <li>Provide information about you</li> <li>Each joint applicant must sign</li> </ol>	•	rty in the lines prov	vided for applican	t and co-app	licant below.	
We intend to apply	y for joint credit: Applicant_			Co-Applica	nt		
NAME (LAST, FIRST, MIDDLE)		SOC. SEC. N	SOC. SEC. NO.			DATE OF BIRTH	
HOME ADDRESS		НОМЕ РНО	DNE NO.		CELL PHONE NC	).	
CITY	STATE	ZIP	MORT	GAGE/RENT PAYMENT		YEARS/MONTHS THERE	
CO-APPLICANT'S NAME (LA	IST, FIRST, MIDDLE)	CO-APPLICA	ANT'S SOC. SEC. NO.			CO-APPLICANT'S DATE OF BIRTH	
CO-APPLICANT'S ADDRESS		CITY		STATE ZIP		HOME PHONE NO.	
Please tell us about your job							
EMPLOYER OR FIRM NAME			POSIT	TION			
STREET ADDRESS			( PHON	) NE NO.			
CITY	STATE	ZIP	STAR	TING DATE			
\$ MONTHLY GROSS INCOME*		\$	OME <sup>**</sup> & SOURCE			PER: 🗍 MONTH 🗐 YEAR	
CO-APPLICANT'S EMPLOYER *Income Verification: CU Ad **Alimony, separate maintena Personal References	2, ADDRESS & PHONE NO. Ivantage requires income verification for all loans nee or child support need not be revealed if you	. To expedite your loan, <sub>F</sub> do not wish to rely on it.	please include proof of inc	come with this application	on (i.e., copy of l	ast two pay stubs, W-2 form, etc.).	
1.	10005			CTATE	710	( )	
NAME	ADDRES	55	CITY	STATE	ZIP	HOME PHONE NO.	
2. NAME Security Interest: Com	ADDRES		CITY be signed and o	STATE	ZIP	HOME PHONE NO.	
I(We) hereby grant the credit union a security interest in all individual and joint share accounts I(we) have with the credit union now or in the future from which I(we) can withdraw for my(our) own use without the consent of a person not obligated on my(our) VISA account. Shares or deposits in an Individual Retirement Account or in any other account that would lose special tax treatment under state or federal law if given as security are not subject to this security interest. When I(we) are in default the credit union may apply the funds in these accounts to any amounts owing on my(our) credit card account. In addition, \$5.00 of the balance in my(our) regular share account will be held and not available for withdrawal as long as my(our) credit card account is open.							
X SIGNATURE OF APPLICANT						DATE	
X SIGNATURE OF CO-APPLICA	NT					DATE	
Application & Agreem	ient						
This application is submitted to obtain credit and I(we) represent that all information herein is true and complete. I (We) also authorize the credit union to verify or obtain further information as it deems necessary from consumer reporting agencies and other creditors and to verify employment or other sources of income. If this application is approved and VISA card(s) issued, I(we) agree that I(we) will be bound by the VISA Terms and Conditions that will be sent with the cards or in a separate approval letter and all amendments to the VISA Terms and Conditions.							
Negative Information Notice: You may report information about my(our) account to credit bureaus. Late payments, missed payments, or other defaults on my(our) account may be reflected in my(our)credit report(s).							
X SIGNATURE OF APPLICANT				CREDIT UNION USE ONLY			
X SIGNATURE OF CO-APPLICA	NT	DATE			LOAN APPRO		
	as FOLLOWS: (PLEASE PRINT) d in the name of a person who has	not signed above.				DATE	
CARD #1				COMMENTS			
CARD #2							

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