

application

I am (we are) applying for (check one):

Platinum Visa (\$5000 minimum) Classic Visa (no minimum). Credit limit requested: _____

Electronic payment REQUIRED for Platinum accounts If you do not qualify for a Platinum card, you may be offered a Classic card.

Applicant Information: Please select joint application if you wish to include your spouse or other applicant on this loan as a co-borrower. Married applicants may apply for separate credit.

Individual Joint (complete co-applicant section and sign)

* If you are retired, self-employed, unemployed, a homemaker or a student, please complete the employment information as it pertains to you.

** Provide information about your spouse's income if you live in Washington, Idaho or another community property state, OR if you are relying on your spouse's income to repay us, OR if your spouse will be using the account. Provide information about alimony, child support, or separate maintenance income only if you wish it to be considered as a basis of repaying this obligation.

Account number _____ Social Security Number _____

Name: last, first, middle initial _____

Street Address _____

City _____ State _____ Zip _____

Birthdate _____ E-mail address _____

() _____ () _____
Home Phone Work Phone

Employer _____ Occupation* _____

\$ _____
Gross Annual Income** Employment Start Date

\$ _____ rent _____
Monthly Rent/Mortgage own # of years there

Co-Applicant Information

_____ Social Security Number _____

Name: last, first, middle initial _____

Street Address _____

City _____ State _____ Zip _____

Birthdate _____ E-mail address _____

() _____ () _____
Home Phone Work Phone

Employer _____ Occupation* _____

\$ _____
Gross Annual Income** Employment Start Date

\$ _____ rent _____
Monthly Rent/Mortgage own # of years there

This statement is submitted to obtain credit and I (we) certify that all information herein is true and complete. I (we) also authorize the Credit Union to verify or obtain further information concerning my (our) credit standing. By using or signing the card, I (we) shall be deemed to have agreed to and accepted the terms and conditions of the Credit Card Agreement, a copy of which will be mailed to me (us) if this application is granted, receipt of such agreement and acceptance of such terms to be conclusively presumed by the use of the card. I (we) understand that minimum credit and income requirements apply. I (we) hereby grant the Credit Union a security interest in all of our shares to secure the account.

X _____
Applicant's Signature Date

X _____
Co-Applicant's Signature (only if applying for joint credit) Date

This contract will be governed by the local law of the State of Washington

Payment Protection (referred to as "the program") is voluntary and not required in order to obtain credit. We will not consider whether or not you elect Payment Protection in making our credit decision.

You elect: (Check only one box) Cost per \$100 of the monthly Outstanding Loan Balance*

- Option 1: **Loss of Life + Disability** \$.230
- Option 2: **Disability** \$.150
- Option 3: **Loss of Life** \$.080
- No Protection**

* If the outstanding loan balance is greater than \$50,000, the rate will not be applied to the amount that exceeds \$50,000. The program contains certain terms and exclusions. You are eligible for the program if you are a borrower on the loan and under age 70 on the effective date of the protection. The program protects the first two borrowers listed on the lending agreement. The protected borrower(s) may not qualify for all benefits.

Read the Payment Protection Contract prior to your election.

Your signature below means:

- Your election will remain in effect, according to the terms of the contract, unless subsequently modified.
- You agree that you have received and thoroughly read the Payment Protection Contract.
- You authorize the program fee to be added to your outstanding balance each month. If the election above represents a change in the program for an existing loan, and the cost of the newly elected protection results in increased program fees, you agree to increase your payment or to make more payments of the same amount until what you owe has been repaid.

X _____
Borrower 1 Signature Date

X _____
Borrower 2 Signature Date