



RIVER VALLEY CREDIT UNION
 820 Putney Road • P.O. Box 8366
 Brattleboro, VT 05304
 Phone: (802) 254-4800
 Fax: (802) 254-6957
 Toll Free: (800) 728-5871 • www.rivercu.com

CREDIT CARD APPLICATION



There are costs associated with the use of a credit card. Information about costs, rates and fees may be contained in disclosures provided with this application or by calling us toll-free or collect at (800) 728-5871 or writing to us at the address stated on this application.

Check below to indicate the type of credit for which you are applying. Married Applicants may apply for a separate account.

Individual Credit: You must complete the Applicant section about yourself and the Other section about your spouse if
 1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI)
 2. your spouse will use the account, or
 3. you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance, complete the Other section to the extent possible about the person on whose payments you are relying.

Joint Credit: Each Applicant must **individually** complete appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Co-Applicant box.

Credit Card Account: Individual Joint

If this is an application for joint credit, Applicant and Co-Applicant each agree and acknowledge the intent to apply for joint credit (sign below):

Applicant	Date	Co-Applicant	Date
X	(Seal)	X	(Seal)

Credit Limit Requested \$

APPLICANT				OTHER <input type="checkbox"/> CO-APPLICANT <input type="checkbox"/> OTHER																			
NAME (Last - First - Initial)				NAME (Last - First - Initial)																			
ACCOUNT NUMBER		SOCIAL SECURITY NUMBER		ACCOUNT NUMBER		SOCIAL SECURITY NUMBER																	
BIRTH DATE		EMAIL ADDRESS		BIRTH DATE		EMAIL ADDRESS																	
HOME PHONE		CELL PHONE		HOME PHONE		CELL PHONE																	
BUSINESS PHONE/EXT.				BUSINESS PHONE/EXT.																			
DRIVER'S LICENSE NUMBER/STATE			AGES OF DEPENDENTS			DRIVER'S LICENSE NUMBER/STATE			AGES OF DEPENDENTS														
PRESENT ADDRESS (Street - City - State - Zip)				<input type="checkbox"/> OWN <input type="checkbox"/> RENT																			
LENGTH AT RESIDENCE				LENGTH AT RESIDENCE																			
PREVIOUS ADDRESS (Street - City - State - Zip)				<input type="checkbox"/> OWN <input type="checkbox"/> RENT																			
LENGTH AT RESIDENCE				LENGTH AT RESIDENCE																			
MORTGAGE/RENT OWED TO																							
MORTGAGE BALANCE		MONTHLY PAYMENT		INTEREST RATE		MORTGAGE BALANCE		MONTHLY PAYMENT		INTEREST RATE													
\$		\$		%		\$		\$		%													
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:																							
<input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)																							
<input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)																							
EMPLOYMENT/INCOME						EMPLOYMENT/INCOME																	
START DATE						START DATE																	
EMPLOYMENT STATUS <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME						EMPLOYMENT STATUS <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME																	
NAME AND ADDRESS OF EMPLOYER						NAME AND ADDRESS OF EMPLOYER																	
NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.																							
EMPLOYMENT INCOME PER				OTHER INCOME PER				EMPLOYMENT INCOME PER				OTHER INCOME PER											
\$				\$				\$				\$											
TITLE/GRADE						SOURCE						TITLE/GRADE						SOURCE					
PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS																							
PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS																							
STARTING DATE						ENDING DATE						STARTING DATE						ENDING DATE					

MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE _____ ENDING/SEPARATION DATE _____	MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE _____ ENDING/SEPARATION DATE _____
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STATE LAW NOTICE(S)

Notice to Nebraska Residents: A credit agreement must be in writing to be enforceable under Nebraska law. To protect you and us from any misunderstandings or disappointments, any contract, promise, undertaking, or offer to forebear repayment of money or to make any other financial accommodation in connection with this loan of money or grant or extension of credit, or any amendment of, cancellation of, waiver of, or substitution for any or all of the terms or provisions of any instrument or document executed in connection with this loan of money or grant or extension of credit, must be in writing to be effective.

Notice to New York Residents: New York residents may contact the New York State Department of Financial Services to obtain a comparative listing of credit card rates, fees, and grace periods. New York State Department of Financial Services: 1-800-342-3736 or www.dfs.ny.gov.

Notice to Ohio Residents: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

Notice to Wisconsin Residents: (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened. (2) Please sign if you are not applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.

Signature for Wisconsin Residents Only	Date
X	(Seal)

CONSENSUAL SECURITY INTEREST

You grant us a security interest in all individual and joint share and/or deposit accounts you have with us now and in the future to secure your credit card account. Shares and deposits in an IRA or any other account that would lose special tax treatment under state or federal law if given as security are not subject to the security interest you have given in your shares and deposits. You may withdraw these other shares unless you are in default. When you are in default, you authorize us to apply the balance in these accounts to any amounts due. For example, if you have an unpaid credit card balance, you agree we may use funds in your account(s) to pay any or all of the unpaid balance.

By signing or otherwise authenticating below, you are affirmatively agreeing that you are aware that granting a security interest is a condition for the credit card and you intend to grant a security interest. You acknowledge and agree that your pledge does not apply during any periods when you are a covered borrower under the Military Lending Act. For clarity, you will not be deemed a covered borrower, and your pledge will apply, if: (i) you become obligated on a credit transaction or establish an account for credit when you are not a covered borrower; or (ii) you cease to be a covered borrower.

Security Interest Acknowledgement and Agreement	Date
X	(Seal)

Security Interest Acknowledgement and Agreement	Date
X	(Seal)

SIGNATURES

By signing or otherwise authenticating below:

1. You promise that everything you have stated in this application is correct to the best of your knowledge. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension, or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a crime to willfully and deliberately provide incomplete or incorrect information in this application.
2. You understand that the use of your card will constitute acknowledgment of receipt and agreement to the terms of the Consumer Credit Card Agreement and Disclosure.

Applicant's Signature	Date
X	(Seal)

Other Signature	Date
X	(Seal)

CREDIT UNION USE ONLY

DATE	<input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED	NUMBER OF CARDS	CREDIT LIMIT \$	CREDIT CARD NUMBER
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Signatures

	Date
X	(Seal)

	Date
X	(Seal)



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**APPLICATION AND
 SOLICITATION
 DISCLOSURE**



VISA PLATINUM

Interest Rates and Interest Charges	
Annual Percentage Rate (APR) for Purchases	6.99% to 11.99% , based on your creditworthiness.
APR for Balance Transfers	4.99% to 7.99% Introductory APR for a period of 12 billing cycles, based on your creditworthiness. After that, your APR will be 6.99% to 11.99% , based on your creditworthiness.
APR for Cash Advances	6.99% to 11.99% , based on your creditworthiness.
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.
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 http://www.consumerfinance.gov/learnmore.
Fees	
Transaction Fees - Foreign Transaction Fee	1.00% of each transaction in U.S. dollars
Penalty Fees - Late Payment Fee - Over-the-Credit Limit Fee - Returned Payment Fee	Up to \$20.00 Up to \$20.00 Up to \$25.00

How We Will Calculate Your Balance:

We use a method called "average daily balance (including new purchases)."

Effective Date:

The information about the costs of the card described in this application is accurate as of: October 13, 2017
 This information may have changed after that date. To find out what may have changed, contact the Credit Union.

For California Borrowers, the Visa Platinum is a secured credit card. Credit extended under this credit card account is secured by various personal property and money including, but not limited to: (a) any goods you purchase with this account, (b) any shares you specifically pledge as collateral for this account on a separate Pledge of Shares, (c) all shares you have in any individual or joint account with the Credit Union excluding shares in an Individual Retirement Account or in any other account that would lose special tax treatment under state or federal law, and (d) collateral securing other loans you have with the Credit Union excluding dwellings. Notwithstanding the foregoing, you acknowledge and agree that during any periods when you are a covered borrower under the Military Lending Act your credit card will be secured by any specific Pledge of Shares you grant us but will not be secured by all shares you have in any individual or joint account with the Credit Union. For clarity, you will not be deemed a covered borrower if: (i) you establish your credit card account when you are not a covered borrower; or (ii) you cease to be a covered borrower.

Other Fees & Disclosures:

Late Payment Fee:

\$20.00 or the amount of the required minimum payment, whichever is less, if you are 10 or more days late in making a payment.



SEE NEXT PAGE for more important information about your account.

Over-the-Credit Limit Fee:

\$20.00 or the amount of the transaction exceeding your approved credit limit, whichever is less.

Returned Payment Fee:

\$25.00 or the amount of the required minimum payment, whichever is less.

Rush Fee:

\$35.00.



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**OVER-THE-CREDIT LIMIT
 COVERAGE CONSENT**

YOUR RIGHT TO REQUEST OVER-THE-CREDIT LIMIT COVERAGE

Unless you tell us otherwise, we will decline any transaction that causes you to go over your credit limit. If you want us to authorize these transactions, you can request over-the-credit limit coverage.

If you have over-the-credit limit coverage and you go over your credit limit, we will charge you a fee of up to \$ 20.00 .

You will only pay one fee per billing cycle, even if you go over your limit multiple times in the same cycle.

Even if you request over-the-credit limit coverage, in some cases we may still decline a transaction that would cause you to go over your limit, such as if you are past due or significantly over your credit limit.

If you want over-the-credit coverage and allow us to authorize transactions that go over your credit limit, please:

- Call us at 800-728-5871 ; or
- Check or initial the box below, and return the entire document to us at:

CONSENT FORM FOR OVER-THE-CREDIT LIMIT TRANSACTIONS

ADD COVERAGE

I want over-the-limit coverage. I understand that if I go over my credit limit, I will be charged a fee of up to \$ 20.00 . I have the right to cancel this coverage at any time.

REMOVE COVERAGE

I do not want over-the-limit coverage. I understand that transactions that exceed my credit limit will not be authorized.

Name(s) on Account: _____

Member No: _____ Credit Card Account No: _____

AUTHORIZATION

If there are multiple owners on the Credit Card account, either account owner can act on behalf of all owners on this account. Only one (1) account owner signature is needed to add or remove the over-the-credit limit coverage.

By signing below, you agree to the terms of the over-the-credit limit coverage. If you selected "Add Coverage," you authorize the Credit Union to accept transactions that exceed your credit limit. You understand that if you go over your credit limit, you will be charged a fee. If you selected "Remove Coverage," you understand that the Credit Union may deny any credit card transactions that go over your credit limit. You further understand that this coverage will not go into affect or be removed, based on your selection above, until the Credit Union receives this Consent document from you.

X

X

MEMBER/OWNER SIGNATURE

DATE

JOINT OWNER SIGNATURE

DATE

CREDIT UNION COVERAGE ACKNOWLEDGMENT

SIGNATURE OF CREDIT UNION EMPLOYEE:

EFFECTIVE DATE:

X

Coverage added

Coverage removed