

# VISA 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 or writing to us at the address stated on this application.

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			which you are applying				count.	
			ant section about yoursel					
			collateral is located in a co	mmunity property state (	AK, AZ, CA, II	D, LA, NM, N	IV, TX, WA, WI)	
2. your spouse v				( 16		- P 1	h 11 d	
			me as a basis for repayn on to the extent possible					
			Ily complete appropriate					
Co-Applicant box.	pplicant mus	st illulviuua	ily complete appropriate	s section below. If Co-	Applicant is s	spouse of t	ne Applicant, mark the	
Credit Card Account:	□ Individual	□ loint						
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	or joint creat	і, Арріісані а			intent to apply	7 IOI JOINE CIE		
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Credit Limit Requested	\$							
Purpose/Collateral:				If Authorized User, Nam	If Authorized User, Name:			
APPLICANT				OTHER CO-APPI	LICANT SPO	OUSE GU	ARANTOR OTHER	
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WHERE		END	ING/SEPARATION DATE	WHERE		END	ING/SEPARATION DATE	

REFERENCE		REFERENCE			
NAME AND ADDRESS OF NEAREST RELATIV	E NOT LIVING WITH YOU	NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU			
RELATIONSHIP	HOME PHONE	RELATIONSHIP	HOME PHONE		
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 creditoverthy 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 Signature for Wisconsin Residents Only	ne credit being applied for, if granted, v	will be incurred in the interest of the ma	arriage or family of the undersigned.		
x	(Seal)				
CREDIT CARD CONSENSU	AL SECURITY INTEREST				
law if given as security are not su shares unless you are in default. For example, if you have an unpa balance. By signing or otherwise authenti	bject to the security interest you had when you are in default, you authord credit card balance, you agree cating below, you are affirmativelou intend to grant a security interest.	r account that would lose special ta ave given in your shares and depos orize us to apply the balance in the we may use funds in your account y agreeing that you are aware that st.  Consensual Security Interest Acknowledger	its. You may withdraw these other ese accounts to any amounts due. (s) to pay any or all of the unpaid t granting a security interest is a		
X	(Seal)	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 and for other accounts, products, or services we may offer you or for which you may qualify. 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	Other Signature	Date		
X	(Seal)	X	(Seal)		
<b>CREDIT UNION USE ONLY</b>					
DATE APPROVED  DECLINED (Adverse Action Notice Sent)	CREDIT CARD LIMIT \$ DEBT RATIO/SCORE: BEFORE	NUMBER OF CARDS CREDIT CAI	RD NUMBER		
LOAN OFFICER COMMENTS:					
Credit Committee or Loan Officer Signature	Date (Seal)	Credit Committee or Loan Officer Signature	S Date (Seal)		







Interest Rates and Interest Charges			
Annual Percentage Rate (APR) for Purchases	12.40%		
APR for Balance Transfers	12.40%		
APR for Cash Advances	12.40%		
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			
Annual Fee - Annual Fee	None		
Transaction Fees - Cash Advance Fee - Foreign Transaction Fee	\$2.00 or 2.00% of the amount of each cash advance, whichever is greater None		
Penalty Fees - Late Payment Fee - Returned Payment Fee	Up to <b>\$10.00</b> Up to <b>\$10.00</b>		

#### **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:

This information may have changed after that date. To find out what may have changed, contact the Credit Union.

For California Borrowers, the Visa 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.

#### Other Fees & Disclosures:

#### Late Payment Fee:

\$10.00 or the amount of the required minimum payment, whichever is less, if you are one or more days late in making a payment.

#### Cash Advance Fee (Finance Charge):

\$2.00 or 2.00% of the amount of each cash advance, whichever is greater.

# Returned Payment Fee:

\$10.00 or the amount of the required minimum payment, whichever is less.

<u>Card Replacement Fee:</u> \$5.00.

Document Copy Fee: \$2.00 per page.

PIN Replacement Fee: \$5.00.

Statement Copy Fee: \$2.00 per page.



84 Wadsworth Street Hartford, CT 06106 860-522-5388 www.CSECreditUnion.com

# **AUTOMATIC PAYMENT OPTION FOR CSE VISA ACCOUNTS**

I hereby authorize the Connecticut State Employees Credit Union to deduct, from my share savings or share draft account, my Connecticut State Employees Credit Union Visa payment each month. I understand the payment will be deducted from my account on or before the payment due date which is found on my Visa statement.

- If I choose the **MINIMUM** required payment to be deducted, that amount will be based on 3% of the new balance or \$10.00 minimum, whichever is greater.\*
- If I choose the **FIXED** payment to be deducted, that amount must be greater than or equal to 3% of credit limit.\*
- If I choose the **FULL** payment option, the amount deducted will be equal to the new balance on my most recent statement.\*
- \*If the amount of my payment option is satisfied with a payment prior to the due date, then no additional payment will be transferred on the due date.

I request the	following payment option:	
	DEDUCT <b>MINIMUM</b> PAYMENT	
	DEDUCT <b>FIXED</b> PAYMENT AMOUNT OF \$	
	DEDUCT <b>FULL</b> PAYMENT	
Please deduc	t the payment from my:	
	SHARE SAVINGS ACCOUNT	
	SHARE DRAFT (CHECKING) ACCOUNT	
Signature	Member Number	Date
******	**************	************
from my shar	ees Credit Union deduct my Connecticut State E	nt option. I no longer want to have Connecticut Employees Credit Union Visa Payments automatical nt. I will continue to pay my monthly payment on o and I will have a late payment and interest due.
Signature	Member Number	Date



84 Wadsworth Street Hartford, CT 06106 (860) 522-7147 www.csecreditunion.com

# **Credit Card Pledge** of Shares/Deposits

PLEDGE INFORMATION						
Account Owner/Cardholder Name(s):						
_						
Share/Deposit Account Number:		-				
Amount Pledged (Choose one option):	<b>\$</b>		% of your credi	it limit		
ACKNOWLEDGEMENT AND AUTHORIZATION						
By signing, or otherwise authenticating specified above as security for your C deposit account as security for this Cr You authorize the Credit Union to app Account. You understand that this do Disclosure, and is herein incorporated by Account Owner/Cardholder Signature	Credit Card Account was edit Card Account, and only these shares or decument is governed I	vith the Credit Union and shall grant Us a supposits to what You co	identified herein. You meecurity interest in this decome when in default on the Consumer Credit Card A	nust maintain a eposit Account. the Credit Card		
CREDIT UNION USE ONLY						
Credit Card Account Number:						
Processed By:		Date Processed:				