

dmcu CREDIT CARD APPLICATION

NOTICE: Married applicants may apply for individual credit.

Member Account Number _____ Requested Credit Limit \$ _____

Check the box indicating the type of credit your applying for:

- ☐ **Individual Credit:** 1) Complete applicant section if you are relying only on your own income and assets to establish credit.
2) Complete co-applicant section providing information about your spouse or former spouse if you reside in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI) or if you are relying on alimony, child support or separate maintenance payments to establish credit.
- ☐ **Joint Credit:** 1) Complete applicant and co-applicant section providing information about you and the other party.
2) Each joint applicant must sign below.

We intend to apply for joint credit: Applicant's Signature _____ Co-Applicant's Signature _____

Important information about procedures for opening a new account:

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, birth date and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

| | | | | | | | |
|---|--|-----------------------------|--|---|--|-----------------------------|--|
| <input type="checkbox"/> Check if you are applying for credit in your name only | | | | <input type="checkbox"/> Check if you have an Authorized User. For Authorized User fill in; Name, Address, Birth Date, Social Security Number, Relationship | | | |
| email address _____ | | | | | | | |
| By signing below, I certify that I am applying for joint credit. | | | | By signing below, I certify that I am applying for joint credit. | | | |
| Signature _____ | | Date _____ | | Signature _____ | | Date _____ | |
| Applicant's Name (Please Print) | | Savings (Share) Account No. | | Co-Applicant's Name (if Joint Account) | | Savings (Share) Account No. | |
| Current Street Address | | Birth Date | | Current Street Address | | Birth Date | |
| City/State/Zip | | how long? | | City/State/Zip | | how long? | |
| Home Phone | | Social Security Number | | Home Phone | | Social Security Number | |
| Employer | | Hire Date | | Employer | | Hire Date | |
| Position | | Driver's License No. | | Position | | Driver's License No. | |
| Work Phone | | Monthly Gross Salary | | Work Phone | | Monthly Gross Salary | |
| Previous Employer | | Years | | Relationship | | | |
| Name of (2) References (not living with you) | | Address | | Phone | | Relationship | |
| 1. | | | | | | | |
| 2. | | | | | | | |
| I: <input type="checkbox"/> Own <input type="checkbox"/> Rent my residence | | Value of Home \$ _____ | | I: <input type="checkbox"/> Own <input type="checkbox"/> Rent my residence | | Value of Home \$ _____ | |
| Housing Payment _____ | | Mortgage Co. _____ | | Housing Payment _____ | | Mortgage Co. _____ | |
| Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. | | | | | | | |
| Alimony, child support, separate maintenance received under: <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral understanding | | | | Alimony, child support, separate maintenance received under: <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral understanding | | | |
| Other income: \$ _____ per _____ Source(s) of other income: _____ | | | | Other income: \$ _____ per _____ Source(s) of other income: _____ | | | |
| <p>By signing this application, I hereby authorize the credit union to check my credit and employment. I realize I will be required to provide lender with a copy of my current pay stub or proof of income. I warrant the truth of the information contained in this application and realize it will be relied upon by lender in deciding whether or not to grant the credit which is applied for. Application subject to approval.</p> <p>Other Important Disclosures: Security: You specifically grant us a consensual security interest in all individual and joint accounts you have with us now and in the future to secure repayment of credit extended under this agreement. You also agree that we have similar statutory lien rights under state and/or federal law. The granting of this security interest is a condition for issuance of credit under this agreement. If you are in default, we can apply your shares to the amount you owe. Shares and deposits in an Individual Retirement Account or any other account that would lose special tax treatment under state or federal law if given are not subject to this security interest. Balance Transfer: If I am transferring some balance to the DMCU card, by signing below I am signifying that I have read the below balance transfer disclosure.</p> <p>Applicant Signature _____ Date _____ Co-Applicant Signature _____ Date _____</p> | | | | | | | |
| Easy Balance Transfer Form <input type="checkbox"/> Yes, I would like to transfer the following credit/loan balances to my DMCU VISA Credit Union. | | | | | | | |
| Credit Card or Loan | | Billing Address | | Account Number | | Exact Balance | |
| _____ | | _____ | | _____ | | _____ | |
| _____ | | _____ | | _____ | | _____ | |
| <p>I understand Detroit Metropolitan Credit Union is not responsible for my payments being late or lost in the mail. This transfer(s) is treated as a Cash advance according to the terms set forth in the disclosure, though the cash advance fee may be waived for balance transfers. I understand this Cash Advance may not pay off the total balance in its entirety because of the possibilities of outstanding charges on some of the above accounts or an insufficient credit limit on my DMCU VISA. If my consolidated balance above is greater than my DMCU VISA credit limit, please pay the amount up to my available DMCU VISA credit limit in the order listed above. There is no grace period on cash advance obtained from ATMs or financial institutions. The finance charge on cash advances will accrue from the date the cash advance is charged to my account.</p> | | | | | | | |
| <p>CREDIT INSURANCE: Credit Insurance is available for a nominal cost for this loan, if you are interested in credit insurance please check below:</p> <p>Credit Disability <input type="checkbox"/> Yes <input type="checkbox"/> No Single Credit Life <input type="checkbox"/> Yes <input type="checkbox"/> No Joint Credit Life <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | | | | | | | |

For the most up-to-date credit card disclosures: www.dmcu.com, call 313-568-5000 or write to us at Detroit Metropolitan Credit Union, 1480 E. Jefferson, Detroit, MI 48207.

Do Not Write in this space. Date _____ ☐ Approved ☐ Denied Amount \$ _____ Signature of Loan Officer(s) _____