CONSUMER HEALTHCARE FEDERAL CREDIT UNION 1000 Cliff Mine Road Ste.140 Pittsburgh, PA 15275

CREDIT CARD APPLICATION



There are costs associat application or by		t costs, rates and fees may be contained in disclosures provided with this 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.						ount.		
 Individual Credit: You must complete the Applicant section about yourself and the Other section about your spouse if 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) your spouse will use the account, or 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 jo	oint credit,	Applicant an	d Co-Applicant each agre		ent to apply to	or joint credi	, ,	
Applicant X			Date (Seal)	Co-Applicant Date			Date (Seal)	
Credit Limit Requested	\$			If Authorized User, Nam	ie:			
				Guarantors Complete	OTHER sectio	n below.		
APPLICANT					CANT SPO	OUSE 🗌 GI		
NAME (Last - First - Initial)				NAME (Last - First - Initial)				
ACCOUNT NUMBER	SOCIAL S	ECURITY NUME	BER	ACCOUNT NUMBER	SOCIAL SI	SOCIAL SECURITY NUMBER		
BIRTH DATE	EMAIL AD	DRESS		BIRTH DATE	EMAIL AD	EMAIL ADDRESS		
HOME PHONE C	ELL PHONE		BUSINESS PHONE/EXT.	HOME PHONE	CELL PHONE		BUSINESS PHONE/EXT.	
DRIVER'S LICENSE NUMBER/STA	TE	AGES OF DEF	PENDENTS	DRIVER'S LICENSE NUMBER/	STATE	AGES OF DE	PENDENTS	
PRESENT ADDRESS (Street – City – State – Zip)				PRESENT ADDRESS (Street – City – State – Zip)				
PREVIOUS ADDRESS (Street - Cit	y – State – Zip)	OWN RENT	PREVIOUS ADDRESS (Street – City – State – Zip)				
MORTGAGE/RENT OWED TO				MORTGAGE/RENT OWED TO				
				MORTGAGE BALANCE MONTHLY PAYMENT INTEREST RATE				
MORTGAGE BALANCE MC \$	ONTHLY PAY	MENT	INTEREST RATE %	MORTGAGE BALANCE	\$	MENT	INTEREST RATE %	
COMPLETE FOR JOINT CREDIT, S PROPERTY STATE:	SECURED CR	EDIT OR IF YO	J LIVE IN A COMMUNITY	COMPLETE FOR JOINT CRED PROPERTY STATE:	IT, SECURED CR	EDIT OR IF YO	U LIVE IN A COMMUNITY	
	D	JNMARRIED (S	ingle - Divorced - Widowed)	MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)				
EMPLOYMENT/INCOME START DATE				EMPLOYMENT/INCOME START DATE				
EMPLOYMENT STATUS		ART TIME		EMPLOYMENT STATUS FULL TIME 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.			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 INCO			
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 DA	ATE		

MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING	G NEXT YEAR?	MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR?		
WHERE	ENDING/SEPARATION DATE	WHERE	ENDING/SEPARATION DATE	

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 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			
X	(Seal)		
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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	е	Security Interest Acknowledgement and Agreement	Date
X (Se	al)	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	ł
	Agreement and Disclosure.	

Applicant's	Signature			Date (Seal)	Other Signati	ure	Date (Seal)
CREDIT	UNION USE	ONLY					
DATE	APPROVED	NUMBER OF CARDS	CREDIT LIMIT \$			CREDIT CARD NUMBER	
Signatures			•				
				Date			Date
X				(Seal)	X		(Seal)