CREDIT APPLICATION

Credit Limit Requested $ _____

Check Account Choice:
(Signature required for joint applicant)
Visa®

☐ Individual Account
☐ Joint Account
(see co-applicant and signatures section)
☐ Credit Line Increase

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, Federal laws require all financial institutions to obtain, verify and record information that identifies each person who opens an Account. What this means to you: When you open an Account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

APPLICANT

Note: All applicable sections should be filled out completely to avoid delay in processing your application.

Last Name	First	Middle	Social Security Number

Date of Birth	No. of Dependents	Home Phone	Cell Phone	Own ☐ Rent ☐ Other ☐	Monthly Payment $

Current Address	City	State	Zip Code	How Long (yrs)

Mailing Address (if different from above)	City	State	Zip Code	How Long (yrs)

Previous Address (if less than 2 years at present address)	City	State	Zip Code	How Long (yrs)

Employer	Self Employed ☐Yes ☐No	Work Phone	Date Employed

Address	Position/Occupation	Monthly Gross Income $

Name and Address of Previous Employer (if less than 2 years at present employer)	How Long (yrs)

Source of Additional Income: Income from alimony, child support or separate maintenance need not be revealed if it is not considered in determining creditworthiness	Amount per Month $

Nearest Relative (Not Living With You)	Home Phone	Relationship

CO-APPLICANT

Intended for joint applicant, this information is not required for an individual account.

Last Name	First	Middle	Social Security Number

Date of Birth	No. of Dependents	Home Phone	Cell Phone	Own ☐ Rent ☐ Other ☐	Monthly Payment $

Current Address	City	State	Zip Code	How Long (yrs)

Previous Address (if less than 2 years at present address)	City	State	Zip Code	How Long (yrs)

Employer	Self Employed ☐Yes ☐No	Work Phone	Date Employed

Address	Position/Occupation	Monthly Gross Income $

CREDIT INFO

Attach Additional Sheets if Necessary

Name and Address of Creditor	Name under Which Account is Carried	Account Number	Balance	Monthly Payment
1. Home Mortgage/Rent				
2. Bank Credit Card/Bank Name and Address				

SIGNATURES

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: This statement is submitted to obtain credit and I/we certify that all information herein is true and complete. I/We agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of this institution. I/We agree to be bound by the terms and conditions of the cardholder agreement, a copy of which will be mailed to the applicant if this application is granted, receipt of such agreement and acceptance of such terms to be conclusively presumed by the applicant's use. If you intend to apply for joint credit, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. We may report information about your account to the credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

X _____ Applicant Signature _____ Date

X _____ Co-Applicant Signature _____ Date

FOR INTERNAL USE ONLY

Visa Account No.

Date Approved	Credit Line	Approved By

Electric Machinery Credit Union, Minneapolis, MN 55413-2400 *FOLD AND SECURE WITH TAPE FOR MAILING* *Application ©2009 FIS® 05/10*

All contents are accurate at the time of printing, for changes that may have been made after printing please call (612) 378-8161.