

The VERMONT Platinum Card



LINE OF CREDIT REQUESTED \$ _____

BALANCE TRANSFER REQUEST

Note: Please send a copy of your last statement.

- Transfer my present balance only, or
 Pay off the present balance and close out the credit card account(s) listed below:

Account # _____ Account # _____ Signature _____

APPLICANT INFORMATION

Member # _____
 Name _____ Soc Sec # _____ Birth Date _____
 Street _____ City _____ State _____ ZIP _____
 Daytime Phone _____ Evening _____
 Occupation/Employer _____ Phone _____ Address _____
 Date Employed _____ Annual Income \$ _____
 Other Income \$ _____ Source* _____

CO-APPLICANT INFORMATION

Member # _____
 Name _____ Soc Sec # _____ Birth Date _____
 Street _____ City _____ State _____ ZIP _____
 Daytime Phone _____ Evening _____
 Occupation/Employer _____ Phone _____ Address _____
 Date Employed _____ Annual Income \$ _____
 Other Income \$ _____ Source* _____

CO-SIGNER INFORMATION

NOTICE TO CO-SIGNER:

YOUR SIGNATURE ON THIS NOTE MEANS THAT YOU ARE EQUALLY LIABLE FOR REPAYMENT OF THIS LOAN. IF THE BORROWER DOES NOT PAY, THE LENDER HAS A LEGAL RIGHT TO COLLECT FROM YOU.

Member # _____
 Name _____ Soc Sec # _____ Birth Date _____
 Street _____ City _____ State _____ ZIP _____
 Daytime Phone _____ Evening _____
 Occupation/Employer _____ Phone _____ Address _____
 Date Employed _____ Annual Income \$ _____
 Other Income \$ _____ Source* _____

INDEBTEDNESS <i>(including child support, etc.) Attach copies if needed.</i>	Monthly Payment	Owned by		
		Applicant	Co-Applicant	Co-Signer
<input type="checkbox"/> Own <input type="checkbox"/> Rent				
Property Taxes				
Other:				
Other:				
Other:				

SIGNATURES

You certify that all statements made on this application are true and correct. You authorize VSECU 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 if this application is approved and credit card(s) issued, a copy of the Cardholder Agreement will be sent to you and you agree that by signing, using or permitting another person to use the credit card(s), you will be bound by the terms and conditions of the Agreement.

Applicant Signature _____ Date _____ Co-Applicant Signature _____ Date _____ Co-Signer Signature _____ Date _____

*Alimony or child support or maintenance income are optional and need not be revealed if the applicant does not choose to rely on such income in applying for credit.

CREDIT UNION USE ONLY	<input type="checkbox"/> Approved <input type="checkbox"/> Declined	Credit Limit \$ _____	Debt Ratio _____
Date _____	Credit Committee/Loan Officer _____	Comments/Conditions _____	



VERMONT STATE EMPLOYEES CREDIT UNION
 P.O. Box 67
 Montpelier, VT 05601-0067
 802/800 371-5162
 www.vsecul.com

**APPLICATION AND
 SOLICITATION
 DISCLOSURE**



Interest Rates and Interest Charges	
Annual Percentage Rate (APR) for Purchases	<p>Vermont Based Rate</p> <p>This APR will vary with the market based on the Prime Rate.</p> <p>Standard Rate</p> <p>This APR will vary with the market based on the Prime Rate.</p>
APR for Balance Transfers	This APR will vary with the market based on the Prime Rate.
APR for Cash Advances	This APR will vary with the market based on the Prime Rate.
Penalty APR and When it Applies	
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.
Minimum Interest Charge	None
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 - Balance Transfer Fee - Cash Advance Fee - Foreign Transaction Fee	None None 1.00% of each transaction in U.S. dollars
Penalty Fees - Late Payment Fee	Up to \$20.00

How We Will Calculate Your Balance:

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

Vermont Based Rate: The Vermont Based APR will apply to purchases identified by the merchant's processing code. This is contingent on how a merchant has set up their processing system and if they use a Vermont state code within their address for transactions processed by them.

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 Vermont Based Rate and Standard Rate are secured credit cards. 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:

Equal to the required minimum payment if you are five or more days late in making a payment. However, the Fee will not exceed \$20.00.

Card Replacement Fee:

\$10.00.

Expedited Card Replacement Fee:

\$40.00.

Initial Request Stop Payment/Revocation of Authorization Fee:

\$18.00.

Update to Initial Request Stop Payment/Revocation of Authorization Fee:

\$1.50.