



SMART
FEDERAL CREDIT UNION

3454 North High Street
Columbus, Ohio 43214
(614) 261-0650
www.smartfedcu.com

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 (866) 860-0650 or writing to us at the address stated on this application.



CREDIT CARD APPLICATION

Check below to indicate the type of credit for which you are applying. Married Applicants may apply for a separate account.

Individual Credit: You must complete the Applicant section about yourself and the Other section about your spouse if
 1. 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)
 2. your spouse will use the account, or
 3. 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-Applicant is spouse of the Applicant, mark the Co-Applicant box.

Credit Card Account: Individual Joint

If this is an application for joint credit, Applicant and Co-Applicant each agree and acknowledge the intent to apply for joint credit (sign below):

Applicant Signature X	Date	Co-Applicant Signature X	Date
(Seal)		(Seal)	

Credit Limit Requested \$ _____ If Authorized User, Name: _____

APPLICANT **OTHER** CO-APPLICANT SPOUSE GUARANTOR OTHER

NAME (Last - First - Initial) _____ NAME (Last - First - Initial) _____

ACCOUNT NUMBER	SOCIAL SECURITY NUMBER/INDIVIDUAL TAX ID NUMBER	ACCOUNT NUMBER	SOCIAL SECURITY NUMBER/INDIVIDUAL TAX ID NUMBER
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BIRTH DATE	EMAIL ADDRESS	BIRTH DATE	EMAIL ADDRESS
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HOME PHONE	CELL PHONE	BUSINESS PHONE/EXT.	HOME PHONE	CELL PHONE	BUSINESS PHONE/EXT.
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DRIVER'S LICENSE NUMBER/STATE	AGES OF DEPENDENTS	DRIVER'S LICENSE NUMBER/STATE	AGES OF DEPENDENTS
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PRESENT ADDRESS (Street - City - State - Zip)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	LENGTH AT RESIDENCE
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PREVIOUS ADDRESS (Street - City - State - Zip)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	LENGTH AT RESIDENCE
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MORTGAGE/RENT OWED TO _____ MORTGAGE/RENT OWED TO _____

MORTGAGE BALANCE	MONTHLY PAYMENT	INTEREST RATE
\$ _____	\$ _____	% _____

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)

EMPLOYMENT/INCOME

EMPLOYMENT STATUS FULL TIME PART TIME HOURS PER WEEK _____

START DATE _____ 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.

EMPLOYMENT INCOME PER \$ _____	OTHER INCOME PER \$ _____
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TITLE/GRADE _____ SOURCE _____

PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN TWO YEARS _____

STARTING DATE _____	ENDING DATE _____
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MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? YES NO WHERE _____ ENDING/SEPARATION DATE _____

REFERENCE

NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU: _____

RELATIONSHIP _____	HOME PHONE _____
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CREDIT CARD APPLICATION (continued)

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 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 _____ Date _____
X (Seal)

CREDIT CARD 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.

Consensual Security Interest Acknowledgement and Agreement _____ Date _____
X (Seal)

Consensual Security Interest Acknowledgement and Agreement _____ Date _____
X (Seal)

SIGNATURES

By signing or otherwise authenticating below:

- 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.
- 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 _____
X (Seal)

Other Signature _____ Date _____
X (Seal)

CREDIT UNION USE ONLY

DATE	<input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED (Adverse Action Notice Sent)	CREDIT CARD LIMIT \$	NUMBER OF CARDS	CREDIT CARD NUMBER
		DEBT RATIO/SCORE: BEFORE	AFTER	

LOAN OFFICER COMMENTS:

Credit Committee or Loan Officer Signatures _____ Date _____
X (Seal)

Credit Committee or Loan Officer Signatures _____ Date _____
X (Seal)



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**APPLICATION AND
SOLICITATION
DISCLOSURE**



VISA CLASSIC

Interest Rates and Interest Charges	
Annual Percentage Rate (APR) for Purchases	6.80%, 9.80%, 13.80% or 17.80% , based on your creditworthiness.
APR for Balance Transfers	6.80%, 9.80%, 13.80% or 17.80% , based on your creditworthiness.
APR for Cash Advances	6.80%, 9.80%, 13.80% or 17.80% , based on your creditworthiness.
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	
Transaction Fees	
Foreign Transaction Fee	1.00% of each multiple currency transaction in U.S. dollars 0.80% of each single currency transaction in U.S. dollars
Penalty Fees	
Late Payment Fee	Up to \$25.00
Returned Payment Fee	Up to \$25.00

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: May 01, 2017. This information may have changed after that date. To find out what may have changed, contact the Credit Union.

For California Borrowers, the Visa Classic 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:

\$25.00 or the amount of the required minimum payment, whichever is less, if you are 10 or more days late in making a payment.

Returned Payment Fee:

\$25.00 or the amount of the required minimum payment, whichever is less.

Card Replacement Fee:

\$5.00.

Document Copy Fee:

\$5.00.

Emergency Card Replacement Fee:

\$5.00.

Cash Fee:

\$30.00.

Statement Copy Fee:

\$5.00.