

## Your Right to Request Over-the-Credit Limit Coverage

Due to regulatory changes, ProFed will no longer authorize transactions that cause you to go over your credit limit, unless you tell us otherwise. If you want us to authorize these transactions, you must request over-the-credit limit coverage. If you have over-the-credit limit coverage and you go over your credit limit, we will charge you a fee of up to \$25.

You will only pay one fee per billing cycle, even if you go over your credit limit multiple times in the same cycle.

Even if you request over-the-credit limit coverage, in some cases we may still decline a transaction that would cause you to go over your limit, such as if you are past due or significantly over your credit limit.

If you want over-the-credit limit coverage and to allow us to authorize transactions that go over your credit limit, please call us at **260-483-0514 ext. 12**, or **800-752-4613 ext. 12**. You may also check the box below and return the form to us.

I want over-the-credit limit coverage. I understand that if I go over my credit limit, I will be charged a fee of up to \$25. I have the right to cancel this coverage at any time.

I do not want over-the-credit limit coverage. I understand that transactions that exceed my credit limit will not be authorized.

Name (please print) \_\_\_\_\_

Date \_\_\_\_\_

## Balance Transfer

By signing below, I authorize you to bill my approved Professional Federal Credit Union credit card account in the amount listed below. I understand that you will advise me when payment was mailed or if you are unable to process my payment request for any reason. In addition, Professional Federal Credit Union will not be responsible for any charges billed to me for the account indicated below.

Card Issuer \_\_\_\_\_

Complete Payment Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Account # \_\_\_\_\_

Exact Amount To Pay \$ \_\_\_\_\_

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Maximum total transfer amount is the available credit on my account on the date of transfer.**

## The Best in Buying Power!

| Compare our Rates and Terms*                         |   |
|--|---|
| Annual Percentage Rate (APR) for Purchases           | <b>11.5%</b> Non-Variable Rate<br><b>9.25%</b> Variable Rate**  |
| Other APRs   | <b>11.5%</b> Non-variable Rate and <b>9.25%</b> Variable Rate** for Cash Advances and Balance Transfers                                   |
| Variable Rate Information                            | Your APR may vary. The rate is changed quarterly. See explanation below.**  |
| Grace Period for repayment of balances for purchases | 25 days to repay a balance without a finance charge   |
| Method of Computing the Balances for Purchases       | Average Daily Balance Method (including new transactions)   |
| Annual Fees  | None  |
| Minimum Finance Charge                               | None  |
| Other Fees   | Late Fee: \$25<br>Over-the-Limit Fee: up to \$25<br>ISA*** Fee: 1% of transaction<br>Balance Transfer Fee: none<br>Cash Advance Fee: none |

\*The information about the costs of the card described in this application is accurate as of January 2012. This information may have changed after that date. For updated information, contact our VISA department at 260-483-0514 ext. 12 or 800-752-4613 ext. 12 or write us at: ProFed, P.O. Box 5466, Fort Wayne, IN 46895-5466.

\*\*The variable rate APR (Annual Percentage Rate) applicable to all billing cycles beginning in a calendar quarter is the highest prime rate published in the *Wall Street Journal* on the 10th day (or next business day) of the month preceding the calendar quarter (March, June, September and December) plus 6.0%.

\*\*\* International Service Assessment (ISA) applies to all foreign transactions.

## Visa Gold Credit Card

**PROFED**



# Visa Gold Credit Card Application

**Individual**  **Joint**  **We intend to apply for joint credit.** Applicant initials Joint-Applicant initials  **Guarantor** Complete the **Other** section. **Other Applicant Account #** \_\_\_\_\_ **Account #** \_\_\_\_\_ (if Joint-Applicant)

Check above to indicate the type of account(s) and type of credit for which you are applying. Married Applicants may apply for a separate account.

Please choose the type of VISA Gold you would like:  **No Fee/Variable Rate\***  **No Fee/Non-Variable Rate** **Yes, I would like a custom PhotoCard at \$9.95 Primary Joint**

1. Your spouse will use the account, or

2. 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 the appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Joint-Applicant box. **Guarantor:** Complete the **Other** section if you are a guarantor on an account.

## Applicant

MEMBER'S FULL NAME (Last, First, Initial) \_\_\_\_\_ # OF DEPENDENTS \_\_\_\_\_

LAST 4 DIGITS OF SOCIAL SECURITY # XXX-XX-\_\_\_\_

HOME PHONE ( ) ( ) CELL PHONE ( ) ( )

EMAIL ADDRESS \_\_\_\_\_

PRESENT ADDRESS (Street, City, State, Zip) \_\_\_\_\_  Own  Rent How Long? \_\_\_\_\_

PREVIOUS ADDRESS (Street, City, State, Zip) \_\_\_\_\_  Own  Rent How Long? \_\_\_\_\_

COMPLETE FOR JOINT CREDIT:  Married  Separated  Unmarried (Single, Divorced, Widowed)

NAME AND ADDRESS OF EMPLOYER (If Self-Employed, type of business) \_\_\_\_\_

WORK PHONE ( ) ( ) ext. \_\_\_\_\_ START DATE \_\_\_\_\_

POSITION \_\_\_\_\_

EMPLOYMENT INCOME Annual Gross Income \$ \_\_\_\_\_ Net Monthly Income \$ \_\_\_\_\_

OTHER INCOME \_\_\_\_\_

Alimony, child support, or separate maintenance income need not be revealed if the Applicant or Joint-Applicant does not choose to have it considered as a basis for repaying this loan.

Source \_\_\_\_\_ Amount per Month \$ \_\_\_\_\_

PREVIOUS EMPLOYER NAME (if employed less than 2 years) \_\_\_\_\_

Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_

NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU \_\_\_\_\_

Relationship \_\_\_\_\_ Home Phone \_\_\_\_\_

## Other

MEMBER'S FULL NAME (Last, First, Initial) \_\_\_\_\_ # OF DEPENDENTS \_\_\_\_\_

LAST 4 DIGITS OF SOCIAL SECURITY # XXX-XX-\_\_\_\_

HOME PHONE ( ) ( ) CELL PHONE ( ) ( )

EMAIL ADDRESS \_\_\_\_\_

PRESENT ADDRESS (Street, City, State, Zip) \_\_\_\_\_  Own  Rent How Long? \_\_\_\_\_

PREVIOUS ADDRESS (Street, City, State, Zip) \_\_\_\_\_  Own  Rent How Long? \_\_\_\_\_

COMPLETE FOR JOINT CREDIT:  Married  Separated  Unmarried (Single, Divorced, Widowed)

NAME AND ADDRESS OF EMPLOYER (If Self-Employed, type of business) \_\_\_\_\_

WORK PHONE ( ) ( ) ext. \_\_\_\_\_ START DATE \_\_\_\_\_

POSITION \_\_\_\_\_

EMPLOYMENT INCOME Annual Gross Income \$ \_\_\_\_\_ Net Monthly Income \$ \_\_\_\_\_

OTHER INCOME \_\_\_\_\_

Alimony, child support, or separate maintenance income need not be revealed if the Applicant or Joint-Applicant does not choose to have it considered as a basis for repaying this loan.

Source \_\_\_\_\_ Amount per Month \$ \_\_\_\_\_

PREVIOUS EMPLOYER NAME (if employed less than 2 years) \_\_\_\_\_

Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_

NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU \_\_\_\_\_

Relationship \_\_\_\_\_ Home Phone \_\_\_\_\_

Joint Applicant  Spouse  Guarantor

# Personal and Financial Information

NAME AND ADDRESS OF FINANCIAL INSTITUTION \_\_\_\_\_

| TYPE OF CREDIT  | CREDITOR NAME | PRESENT BALANCE | MONTHLY PAYMENT | OWED BY APPLICANT | JOINT-APPLICANT |
|---|---------------|-----------------|-----------------|-------------------|-----------------|
| <input type="checkbox"/> Rent <input type="checkbox"/> Mortgage (include taxes and insurance) |               |                 |                 |                   |                 |
| Auto Loan   |               |                 |                 |                   |                 |
| Child Support, Alimony, or Maintenance Income to pay  |               |                 |                 |                   |                 |
|   |               |                 |                 |                   |                 |
|   |               |                 |                 |                   |                 |
|   |               |                 |                 |                   |                 |
|   |               |                 |                 |                   |                 |

Are you a U.S. citizen or permanent resident alien? Yes No

Do you currently have any outstanding judgments or have you ever filed for bankruptcy, had a debt adjustment plan confirmed under chapter 13, had property foreclosed upon or repossessed in the last 7 years, or been a party in a lawsuit? Yes No

Are you a co-maker, co-signer, or guarantor on any loan not listed above? Yes No

For Whom? (Name of others obligated on loan)

To Whom? (Name of Creditor)

## Please Sign and Date Below. Both Signatures Required for Joint Credit (JOINT-APPLICANT MUST BE A MEMBER).

This statement is submitted to obtain credit and I (we) certify that all information herein is true and complete. I (we) realize that in granting credit to me, you will rely on the representations made by me in this Application, and I (we) authorize you to obtain information from any source(s) to which you may apply relative to this Application — each source being authorized to provide you with such information. If this Application is approved for a VISA Credit Card Account, the undersigned applicant(s) agree to be bound by the terms, conditions, and all amendments of the VISA Credit Card Agreement. I (we) will receive a personal identification number to access my credit line through automated teller machines.

**Primary Member Signature** \_\_\_\_\_ **Date** \_\_\_\_\_ **Other Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

## For Credit Union Use Only.

Approved  Declined

L. O. Signature \_\_\_\_\_ Limit \_\_\_\_\_ Account # \_\_\_\_\_

\*If you do not make a selection, upon approval, you will receive a Variable Rate Gold VISA. (See reverse side for VISA rates and other cost information.)