

Platinum VISA® Credit Card Quick Application



Yes, I'd like to apply for a TopMark VISA Card.

I am applying for the following: VISA

My Member Number: _____

Not a Member Yet

IMPORTANT: In order to process your application in a timely manner, please complete all application fields to the best of your knowledge. **Please type, print, and sign application. You can Mail or Drop off your completed application at one of our branch locations.**

First Name _____ Middle Initial _____ Last Name _____ Marital Status _____

Social Security No. _____ Date of Birth _____ Home Phone No. _____ Cell Phone No. _____

Home Address _____ City _____ State _____ Zip Code _____ How Long? _____

Own Rent Other Monthly Rent/Mortgage \$ _____ E-Mail Address _____

Employer _____ Phone No. _____ Date Hired _____ Gross Monthly Income * _____

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Co-Applicant First Name _____ Middle Initial _____ Last Name _____

or Authorized User

Social Security No. _____ Date of Birth _____ Home Phone No. _____

Home Address _____ City _____ State _____ Zip Code _____

Employer _____ Phone No. _____ Date Hired _____ Gross Monthly Income * _____

*Alimony, child support, or separate maintenance income need not be revealed if you do not wish to rely on it.

Next of Kin at a Different Address:

Name _____ Address _____

City/State/Zip _____ Phone Number _____

How many VISA cards would you like to have? _____ Credit Limit Desired _____

Balance Transfer (Optional)

Please transfer the balances listed below to my new TopMark VISA card account. Checks will be issued directly to the creditors. Please enclose current payment stub(s) and return envelope(s). TopMark FCU is not responsible for payments which are late or lost in the mail. There may be outstanding charges on the account and this advance may not pay off the total balances due. Payoffs will be processed as cash advances. All cash advance rules apply.

Name of Account/Credit Card _____ Name of Account/Credit Card _____

Account Number _____ Account Number _____

Amount To Be Paid _____ Amount To Be Paid _____

I/We certify that the above information is true. I/We authorize investigation and verification of my/our credit, employment, and income references to determine my/our eligibility for the credit card account and renewal or future extension of credit. If an account is opened, I/we authorize you to report your credit experience with me/us. The undersigned jointly and severally agree to be responsible for all charges, cash advances, and other fee and terms and conditions on the VISA account, which will be mailed to me upon approval. I/We further pledge all credit union shares and deposits where the credit union may enforce a lien by taking a set off against all such present and future shares in my/our name to the extent of that portion of the loan balance which may be in default, whether by acceleration or otherwise. I/we understand and agree that if my/our loans become delinquent or past due, my/our VISA credit card may be revoked or my/our credit line reduced. I/we understand that the credit limit may be increased or the terms of payments extended or modified, from time to time whether or not upon my/our express request without notice to me/us or any other signer, and that I/we shall nonetheless be responsible for the repayment of all charges incurred upon this account. This includes charges or extensions of credit, unless we specifically request otherwise in writing. The credit union will retain this application whether or not it is approved.

X _____
Signature of Borrower Date

X _____
Signature of Co-Borrower Date

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.

FOR OFFICE USE ONLY

Approved Denied Credit Limit \$ _____ Date _____ By _____

Conditions, if any _____

Reason(s) for denial _____

Credit Disclosure

Annual Percentage Rate for Purchases:

VISA **9.90%** Scores 680 and above.

12.00% Scores 679 and below.

Grace Period For Purchases:

There is a 25 day grace period, calculated from the statement closing date to the payment due date, in which you can pay the New Purchase Balance and any unpaid finance charges on Cash Advances shown on the statement to avoid a finance charge.

Method of Computing Average Daily Balance Method
Balance For Purchases: (including current transactions)

Annual Fee: None

Late Payment: Up to \$20.00

* Rate will be based on your credit history. Returned checks are subject to \$30.00 per item fee. Call TopMark for more details. Credit disclosure is accurate as of 12/18/14 and is subject to change.

** ScoreCard™ Bonus Points are earned for every dollar spent when using your TopMark VISA Card. These Points can be accumulated and redeemed for great gifts, travel rewards, hotel discounts and much more! For a free ScoreCard™ Rewards catalog, please visit scorecardrewards.com.