

Credit Card Application

Please Check One

- If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, then complete section 1 and 3.
- If this is an application for joint credit with another person, complete all sections providing information in section 2 about the joint applicant and sign here:

We intend to apply for joint credit

Applicant _____

Co-applicant _____

SECTION 1

Applicant Information

Name _____ Social Security Number _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____ Yrs at Residence _____

Rent _____
 Monthly Payments _____

Own _____
 Monthly Mortgage _____ Estimated Mortgage Balance _____ Estimated Home Value _____

Home Phone _____ Cell Phone _____ Work Phone _____

Member Number _____ Mother's Maiden Name _____

Employment Information

Employer _____

Position _____ Date of Hire _____ Income _____ Per _____

Additional Income (alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation)

Source _____ Amount _____ Per _____

Source _____ Amount _____ Per _____

Signature Federal Credit Union PO Box 148 Alexandria, VA 22305 (800)336-0284 (703)683-1573 fax



T (800) 336.0284 **SignatureFCU.org**

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SECTION 2

Co-Applicant Information

Name _____ Social Security Number _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____ Yrs at Residence _____

Rent _____
 Monthly Payments _____

Own _____
 Monthly Mortgage _____ Estimated Mortgage Balance _____ Estimated Home Value _____

Home Phone _____ Cell Phone _____ Work Phone _____

Member Number _____ Mother's Maiden Name _____

Employment Information

Employer _____

Position _____ Date of Hire _____ Income _____ Per _____

Additional Income (alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation)

Source _____ Amount _____ Per _____

Source _____ Amount _____ Per _____

SECTION 3

Desired Credit Card Information

Credit Card Type _____ Desired Credit Limit _____

I/We acknowledge that the information on this application for credit is accurate to the best of my/our knowledge, and I/we are not making false representations of our financial situations. I/we authorize Signature Federal Credit Union to pull my/our credit report for the purpose of extending credit.

Applicant Signature _____ Date _____

Co-Applicant Signature _____ Date _____

