



# Loan & Credit Card Application

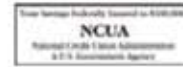
## It's Easy to Apply

You can apply for your loan in person at our office(s), or by phone, fax, mail or on our website at [www.columbinefcu.org](http://www.columbinefcu.org). Loan approval is guaranteed in 24 hours, in most cases. Columbine FCU offers a wide variety of consumer-oriented loans, including:

- New and Used Automobile Loan
- Automobile Leasing Loans
- Recreational Vehicle Loans (Motorhomes, Camping Trailers, Boats)
- Motorcycle Loans
- Computer Loans
- Signature Loans (Unsecured)
- Overdraft Line of Credit Loans
- Share Secured Loans
- 2nd Mortgage and Home Equity Loans
- VISA Credit Card Loans
- Student Loans

## How to Reach Us

Main Office:  
2305 E. Arapahoe Rd., Ste. 234  
Centennial, CO 80122  
(720) 283-2346  
(800) 541-0249  
FAX (303) 795-7751  
[feedback@columbinefcu.org](mailto:feedback@columbinefcu.org)  
[www.columbinefcu.org](http://www.columbinefcu.org)



## VISA® Credit Card and Line of Credit Disclosure

Your Plan A line of credit will have an APR of 11.90% which is a periodic rate of 0.991%. Minimum payments required are 3% of the total unpaid balance with a minimum payment of \$10.

Your Plan B line of credit will have an APR of 13.90% which is a periodic rate of 1.158%. Minimum payments required are 3% of the total unpaid balance with a minimum payment of \$10.

The information about the cost of the card described in this application is accurate as of September 1, 2007. The information may change. To find out if any of this information has changed, write us at Columbine Federal Credit Union, 2305 E. Arapahoe Rd., Ste 234, Centennial, CO 80122 and ask for the latest information regarding our VISA® Credit Card.

Credit Card Type	Plan A	Plan B
Annual Percentage Rate (APR) for Purchases	<b>11.90%</b>	<b>13.90%</b>
Other APRs	Cash Advances: 11.90%	Cash Advances: 13.90%
Variable-Rate Information	NA	NA
Grace Period	25 days for the repayment of the balance for purchases	25 days for the repayment of the balance for purchases
Method of Computing the Balance for Purchases	Average Daily Balance, including new purchases	Average Daily Balance, including new purchases
Annual Fee	\$12	\$0
Minimum Finance Charge	\$.50	\$.50

Transaction Fee for Cash Advances: \$0  
Over the Limit Fee: \$0  
Late Payment Fee\*\*: \$25

Replacement Card Fee: \$12  
Returned Item Fee\*\*\*: \$25

\*The Prime Rate used to determine your APR is the rate published in *The Wall Street Journal* on the last day of the previous month. \*\*The late payment fee is charged if you payment is received more than one (1) day late. \*\*\*The returned item fee is charged when your payment to your account is returned.

Credit Line Desired: \$ \_\_\_\_\_ Number of VISA Cards Desired \_\_\_\_\_

Applying for:  VISA® Plan A OR  VISA® Plan B OR  VISA® Plan C

## LOAN AND CREDIT APPLICATION

### HOW TO APPLY:

1. If you have CUonline Access, logon to your account, apply online and email directly to us.
2. OR - Print this form and follow remaining instructions.
3. Indicate the type(s) of loan(s) you for which you are applying. For your convenience, you may apply for more than one loan at a time.
4. Complete all the sections of the loan application.
5. Check the insurance coverage you prefer.
6. Attach a copy of your pay stub for proof of income
7. Enclose the \$25 application fee.
8. Mail the application back to us or drop it off at the credit union office. For your convenience, you may also fax your application to the credit union at 303-795-7751.
9. Once you've completed a loan with Columbine Federal Credit Union and you need to borrow again, simply call the credit union for a quick update.
10. Thank you for your application. Let us know if you have any questions.

Please Print (in ink) or Type

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

- **Individual Credit:** Complete Applicant section. Complete other section as follows: (1) Information about your spouse if you are living in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI) or if your spouse with use the Account. (2) Information about the party making the payments if you are relying on alimony, spousal support, child support or separate/spousal maintenance as a basis for repayment.
- **Joint Credit:** Provide information about both of you by completing Applicant and Co-Applicant sections.

PURPOSE OF LOAN	AMOUNT REQUESTED	CREDIT LIMIT REQUESTED	TYPE OF LOAN Choose one or more.	<input type="checkbox"/> Credit Card - VISA	<input type="checkbox"/> Debit Card - Mastercard
			<input type="checkbox"/> Signature	<input type="checkbox"/> Collateral Loan (Car, Boat, Computer, etc.)	

APPLICANT		CO-APPLICANT	
NAME	ACCOUNT NUMBER	NAME	ACCOUNT NUMBER
STREET ADDRESS	HOW LONG	STREET ADDRESS	HOW LONG
CITY, STATE, ZIP	DATE OF BIRTH	CITY, STATE, ZIP	DATE OF BIRTH
CURRENT RESIDENCE <small>OWN BUYING RENTING LIVING WITH RELATIVES</small>	SOCIAL SECURITY #	CURRENT RESIDENCE <small>OWN BUYING RENTING LIVING WITH RELATIVES</small>	SOCIAL SECURITY #
DEPENDENTS INCLUDING SELF <small>Number Ages</small>	HOME PHONE # ( )	DEPENDENTS INCLUDING SELF <small>Number Ages</small>	HOME PHONE # ( )
PREVIOUS ADDRESS <small>If less than 2 years at current address</small>		PREVIOUS ADDRESS <small>If less than 2 years at current address</small>	

EMPLOYMENT			
EMPLOYER (If part time, # of hrs. weekly _____)	WORK PHONE ( )	EMPLOYER (If part time, # of hrs. weekly _____)	WORK PHONE ( )
ADDRESS (CITY & STATE)	JOB TITLE	ADDRESS (CITY & STATE)	JOB TITLE
LENGTH OF EMPLOYMENT	MONTHLY GROSS SALARY \$	LENGTH OF EMPLOYMENT	MONTHLY GROSS SALARY \$

PLEASE SUBMIT VERIFICATION OF INCOME WITH YOUR APPLICATION			
FORMER EMPLOYER <small>(If less than 2 years with current employer)</small>	LENGTH OF EMPLOYMENT	FORMER EMPLOYER <small>(If less than 2 years with current employer)</small>	LENGTH OF EMPLOYMENT
ADDTL. INCOME SOURCE MONTHLY <small>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 obligation.</small>	\$	ADDTL. INCOME SOURCE MONTHLY <small>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 obligation.</small>	\$

RELATIVES				
RELATIVE (Not living with you)	RELATIONSHIP	PHONE # ( )	RELATIVE (Not living with you)	RELATIONSHIP PHONE # ( )
ADDRESS (STREET, CITY, STATE & ZIP)			ADDRESS (STREET, CITY, STATE & ZIP)	

FINANCIAL INFORMATION				
CREDITOR'S NAME & ADDRESS	INTEREST RATE	CREDIT LIMIT	PRESENT BALANCE	MONTHLY PAYMENT
RENT/MORTGAGE (Including Home Assoc. Dues & Estimated Value)				
VEHICLE #1	YEAR	MAKE	MODEL	FINANCED WITH
VEHICLE #2	YEAR	MAKE	MODEL	FINANCED WITH
CHILD SUPPORT, CHILD CARE, ALIMONY				
CREDIT CARDS				

LIST ALL OUTSTANDING OBLIGATIONS. (If more space is needed, use a separate sheet.) **TOTALS**

**THESE QUESTIONS APPLY TO BOTH APPLICANT AND CO-APPLICANT**

IF A "YES" ANSER IS GIVEN TO A QUESTION, EXPLAIN ON AN ATTACHED SHEET.			IF A "YES" ANSER IS GIVEN TO A QUESTION, EXPLAIN ON AN ATTACHED SHEET.		
<b>APPLICANT</b>	<b>CO-APPLICANT</b>	Are you a party in a law suit or foreclosure?	<b>APPLICANT</b>	<b>CO-APPLICANT</b>	Have you any outstanding judgements of court orders?
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Are you other than a U.S. citizen or permanent resident alien?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Have you ever been declared bankrupt or filed a petition for Chapter 13?
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Are you a co-maker or co-signer on any loan?			

CREDIT LIFE AND DISABILITY INSURANCE
By checking the appropriate box below, you may apply for Credit Life and/or Credit Disability Insurance on your loan. The Credit Union will disclose the cost of this voluntary insurance to you. (A separate insurance election which discloses the terms and conditions must be signed for coverage to become effective.)
<input type="checkbox"/> Credit Disability
<input type="checkbox"/> Single Credit Life Insurance
<input type="checkbox"/> Joint Credit Life Insurance

ISSUE AN AUTHORIZED USER CREDIT CARD IN THE NAME OF:
AUTHORIZED USERS NAME (Please print clearly)
AUTHORIZED USERS NAME (Please print clearly)

SIGNATURES			
You promise that everything you have stated in this application is correct to the best of your knowledge and that the above information is a complete listing of all your debts and obligations. You authorize the credit union to check your employment and credit history and to obtain credit reports in connection with this application for credit and for any update, renewal or extension of credit received. 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. You understand that it is a federal crime to wilfully and deliberately provide incomplete or incorrecd information on loan applications made to Federal Credit Unions or State Chartered Credit Unions insured by the NCUA.			
Applicant Signature	Date	Co-Applicant Signature	Date