FEES				
Annual Fee	None			
Transaction Fees				
Cash Advances	Either \$1.00 or 3% of the amount of each cash advance, whichever is greater (maximum \$30.00).			
Foreign Transactions	1% of each transaction in U.S. dollars.			
Penalty Fees				
Late Payment	Up to \$30			
Returned Payment	Up to \$20			

How We Will Calculate Your Balance: We use a method called "average daily balance (including new purchases)."

This above information is accurate as of the date of its printing, which is December 15, 2017, and is subject to change after that date. To find out what may have changed, write to us at: Municipal Credit Union, Card Services Department, P.O. Box 992, Peck Slip Station, New York, NY 10272.

For more information, log onto nymcu.org

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Secured VISA® Credit Card



Secured VISA® Credit Card



MUNICIPAL CREDIT UNION CARD SERVICES DEPARTMENT PO BOX 3205 CSS NEW YORK NY 10008-3205

Stamp Here



Secured VISA® Card Application and Authorization

The MCU Secured VISA® Card offers you a superb borrowing option at only **11.90%** APR. Here's how it works: You select your own credit limit from \$300 up to \$5,000. Fill out the attached form and either send us a check or authorize a transfer of the funds from shares in that amount. The funds will be deposited into a special dividend-earning 18-Month Secured VISA® Share Certificate account. This account will serve as your credit line collateral.

What happens next? We send you your VISA® Card!

An MCU Secured VISA® Card is one of the best there is; it offers you:

- ► A low **11.90%** Annual Percentage Rate (APR)
- ▶ No annual fee
- ► A minimum 25 day grace payment period on purchases
- ▶ Direct deposit or automatic payroll deduction as a repayment option
- A full service VISA® Card acceptable up to your credit limit anywhere in the world where VISA® is accepted

For additional information about rates, fees and other costs refer to the disclosure table on the reverse side of the application.

Account #		
Name (Last, First, Midd	le Initial)	
Date of Birth		Social Security #
Mother's Maiden Name		
Pooldontial Address (Pa	aguirod)	P.O. Box #
Residential Address (Re	(quired)	P.U. BUX #
City	State	Zip
	State	Zip
Home Dhone (please in	clude area code/	Years at Address
Home Phone (please in	uue area coue)	rears at Address
Mobile Phone (please ir	aclude area code/	
wionile Friorie (please if		
E-Mail Address		
L-IVIAII AUULESS		
Formula von Manna		Data of Familian and
Employer Name		Date of Employment
Work Phone (please inc	lude area code) Ext.	Annual Salary
\$		
Other Income		Source of Other Income
\$		
Rent/Mortgage Paymen	t	Mortgage Holder
Check the appropriate bo	x below to indicate the credit line	that you wish to establish:
□ \$300 □ \$500	□ \$800 □ \$1,000	□ \$1,500
must be in \$100 increm	any amount betwee ents).	en \$300 and \$5,000
	below to indicate how you wish to	transfer your required deposit:
Transfer from my Munici	ipal Credit Union : ☐ Share Accou	unt 🗆 Share Draft Account
	FORMATION: Your Municipal Cre I rate. For current rates call (212)	
Share Certificate will beg	gin to accrue when the account is	s opened and your deposit
credited. The share certi unless agreed upon by N	ficate will have a term of 18 mon Aunicinal Credit Union	nths and will not be renewed
. ,	idinoipai orodit omon.	
Additional Cardholder		
Name (Last, First, Midd	le Initial)	
Relationship to Applicar	nt	Date of Birth

I agree to be bound by the terms and conditions contained in the Municipal Credit Union Secured VISA® Cardholder Agreement and Disclosure Statement that will be sent to me with the card upon first use of the credit card by me or anyone authorized by me. I understand and agree that a consumer credit report may be requested from one or more consumer reporting agencies (credit bureaus) in connection with this application. Subsequent consumer credit reports may be requested or used in connection with any update, renewal, extension, or collection of the credit requested by this application. If I request, I will be informed whether any consumer report was requested and, if so, of the name and address of the consumer reporting agency which furnished the report. Also, I agree that you may exchange with others credit information about me in connection with this application and any credit MCU extends me. I understand that Municipal Credit Union reserves the right not to open an account for any legally permissible reason it deems appropriate.

SECURITY INTEREST: By signing below, I authorize you to establish a Municipal Credit Union Share Certificate Account in the amount I have selected above to serve as collateral for my Municipal Credit Union Secured VISA® account. As a condition to the Secured VISA® account, I hereby grant Municipal Credit Union a security interest in, and assign to Municipal Credit Union, the share certificate and any renewals, additions and proceeds thereto, to secure payment of all obligations on the Secured VISA® account. I understand that the share certificate deposit is subject to the terms and conditions of the Certificate Agreement (a copy of which I will shortly receive in the mail), and that deposits thereto and withdrawals therefrom are restricted. I understand that if I am in default under the terms of the Secured VISA® Account agreement (or if my Secured VISA® Account is closed by Municipal Credit Union or me for any reason), Municipal Credit Union may, in addition to any other rights or remedies it may have, apply all or any part of the Share Certificate collateral towards the payment of all amounts owed on the Secured VISA® Card Account.

Under penalties of perjury, I certify (1) that the number shown on this form is my current taxpayer identification number; and (2) that I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of failure to report all interest or dividends, or because the Internal Revenue Service has notified me that I am no longer subject to backup withholding; and (3) I am a U.S. person (including a U.S. resident alien).

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

nature of Applicant	Date

CREDIT LIFE AND/OR CREDIT DISABILITY INSURANCE

l	ou interested in having your card balance protected by Credit Life and/or Credit Disability insurancy	e?
[es □No	

If you answer "Yes," the Credit Union will mail you a separate credit insurance enrollment and disclosure form that explains the terms and conditions and discloses the cost to protect your credit card balance. In order for your credit card balance to be covered, you will need to sign this separate application and return it to MCU. The credit insurance is voluntary and is not required to obtain this credit card.

DO NOT WRITE BELOW - FOR CREDIT UNION USE ONLY

ate	Amount of LOC \$	Rate	Share Certificate Balance	Verification and Identification
uthorized Signature				