UPS EMPLOYEES  Applicant having borrowing privi									_	PLICATION
THIS ACCOUNT WILL BE A:	*(FOR JOINT CREDI			You mus	t submit two	o (2) current pa	ystubs and an a	application t	fee of \$10.00 v	with this application.
☐ Individual ☐ Joint Credit*	•	I YOU MUST IN	ITIAL BELOW)		OTHER I	INSURANCE C	PTIONS:			
PAYMENT METHOD: (choose one)					☐ GAP (GUARANTEED AUTO PROTECTION)					
PAYROLL CASH AUTO TRANSFER					$\ \square$ CHECK FOR ADDITIONAL INFORMATION / QUOTE					
☐ TRANSFER FROM: ☐ S	Savings or					I DO NOT REC	QUEST GAP IN	ISURANCE		
I REQUEST A LOAN FOR:	AMOUNT/LIMIT		AMOU	NT/LIMIT	$\square$ MRC	(MECHANICAL	REPAIR COV	ERAGE)		
☐ VEHICLE LOAN*	LINE	OF CREDIT	\$			CHECK FOR	ADDITIONAL IN	NFORMATION	ON / QUOTE	
☐ MOTORCYCLE*		SED END SIGNA	TURE LOAN \$			I DO NOT REC	QUEST MRC IN	SURANCE		
		RE SECURED			NOTIC					
☐ RECREATIONAL VEHICLE*		CCOUNT NO.					ouse or registe PLICANT secti			"RDP")*, you mus
☐ VISA See IMPORTANT VIS										), LA, NM, NV, TX
Indicate: Regular VISA	VISA Secured					WA, WI); or				
*Check One: New Used		chase Refi	nance		(D)	erty state; or		re tne ioan	is located in	a community prop
					` '	Your spouse	or RDP will u			
Purpose/Reason										s he/she wishes to spouse/RDP, yo
Collateral Description							dividual credit.		ii you nave a	spouse/nDF, yo
	OPTIONAL INSUI					ou are under 2	21 years of age	, you must	either:	
NOTE: INSURANCE OPTIONS A INCLUDED ONLY IF REQUESTED					(a)	Provide prod	of your ability	to make th	ne required pa	ayments; or the signature of a
WILL BE FURNISHED PRIOR TO	FUNDING.				(D)					of age and has the
CREDIT INSURANCE OPTIONS  SINGLE CREDIT LIFE INSURA		TV INCLIDANCE					ay the debt ar	•		
☐ JOINT CREDIT LIFE INSURAN							a state with RD nose of a spou		at provide for o	community property
			0.0.00							
SECT	<b>TON A - APPLI</b>	CANT				<b>SECTIO</b>	N B - C	O-APF	PLICAN	Т
						□Spo	use/RDP	[	Other	
PERSONAL INFORM	MATION			PER	SONAL	_ INFORM	IATION			
CREDIT UNION ACCOUNT NO. SO		AIL					CIAL SECURITY N	IO. E-M	IAIL	
FIRST NAME	INITIAL LAST NAME	(JR./SR.)		FIRST N	IAME		INITIAL	LAST NAM	E (JR./SR.)	
CURRENT STREET ADDRESS		APT. NO.	YEARS AT THIS ADDRESS	CURRE	NT STREET /	ADDRESS			APT. NO.	YEARS AT THIS ADDRESS
CITY	STATE ZIP	DRIVER'S LICE	NSE NO. / STATE	CITY			STATE ZII	<b>D</b>	DRIVER'S LIC	CENSE NO. / STATE
7111	STATE ZII	DI IIVEITO EIOE	NOL NO. / OTATE	On			OTATE ZII		DITIVEITO EN	JENGE NO. 7 STATE
DATE OF BIRTH HOME PHON	NE .	NO. OF DEPEN		DATE O	F BIRTH	HOME PHONI	 E		NO. OF DEPE	
( )		(NOT INCLUDIN	IG YOURSELF)			( )			(NOT INCLUI	DING YOURSELF)
PERSONAL REFERENCE NAME	PHO	NE		PERSOI	NAL REFERE	ENCE NAME		PHO	ONE	
	(	)						(	)	
EMPLOYMENT INCO	OME			EMP	LOYMI	ENT INCO	OME			
PRESENT EMPLOYER		GROSS	MONTHLY SALARY	PRESE	NT EMPLOYE	ER .			GROS	S MONTHLY SALARY
		\$							\$	
WORK PHONE			NO. OF YEARS IN THIS LINE WORK F		PHONE				NO. O	F YEARS IN THIS LIN ORK
( )						) DN/TYPE OF WORK				
POSITION/TYPE OF WORK		HIRE DA	TE	POSITIO	ON/TYPE OF	WORK			HIRE	DATE
You need not list income from alimony	child support or separate mainte	nance unless vou	wish us to consider it	You nee	d not list inco	me from alimony	child support or s	enarate main	tenance unless v	ou wish us to consider
for purposes of granting this credit.	, orma support, or separate mante	manoo umooo you	men de le concider li			ng this credit.	orma capport, or o	oparato man	torialise arrices y	ou mon do to concido.
LIST ANY TYPE OF OTHER INCOME	(verification may be required)	GROSS	MONTHLY AMOUNT	LIST AN	IY TYPE OF (	OTHER INCOME	(verification may b	e required)	GROS	S MONTHLY AMOUN
		\$							\$	
	_	'								
HOUSING EXPENSE										(D. )
■ Mortgage or ■ Rent	gage Holder or Landlord				Mortgage Account No.			9	Monthly Payment	Hent
									p ————————————————————————————————————	
SIGNATURES										
AGREEMENT "You" and "Your			•	ho Oraclii I	Inion ! '	ting in-	alor if the end of		le ve ···· f' · ·	oial agraitia - U.
<ol> <li>You certify the accuracy of violation of Section 1014, T</li> </ol>										
2. You authorize the Credit Ur				-			•		•	
determining your eligibility f	or renewal of credit and ac	dditional exten	sions of credit). Yo	u authorize	the Credit	t Union to give	information c	oncerning		
others. You understand and 3. You agree that by using or a	•	,		,				•	Federal Cred	dit Union disclosu
entitled: A) Note, Security A	greements and Federal Dis	closure Stater	nent, B) Sharedraft	Overdraft	Line of Cre	dit and Signat	ure Loan Acco	unt Note ar	nd Federal Dis	
or C) Visa Card Agreement	and Disclosure Statemen	t, (which will be	e given to you if yo	ur applicat	ion is appr	oved and befo	re the first trar	nsaction is	made).	
								*We intend t	to apply for joint cr	edit as indicated above.

X\_\_\_\_\_Applicant Signature **X**Spouse/RDP/Co-Applicant Signature (if applicable) Date Date APPLICANT INITIALS CO-APPLICANT INITIALS FORM 501W REV. 12/12

00133-575-01

## **Section I: Important VISA Disclosure Information**

Interest Rates and Interest Charges								
Annual Percentage Rate (APR) for Purchases, Cash Advances	VISA Card: <b>10.50%</b> VISA Share Secured: <b>10.50%</b>							
and Balance Transfers	Tie/Celiaie educie. 1 e1e e /e							
How to Avoid Paying Interest on	Your due date is at least 25 days after the close of each billing cycle.							
Purchases	We will not charge you any interest on purchases if you pay your entire balance by the due date each month.							
Minimum Charge	If you are charged interest, the charge will be no less than \$1.00							
For Credit Card Tips from the	To learn more about factors to consider when applying for or using a							
Consumer Financial Protection	credit card, visit the website of the Consumer Financial Protection							
Bureau	Bureau at http://www.consumerfinance.gov/learnmore							
Fees								
Annual Fee	None							
Transaction Fees								
Balance Transfer	None							
Cash Advance	2% of the amount of each cash advance (minimum of \$2.50, maximum							
Foreign Transaction	of \$25.00)							
	None							
Penalty Fees								
Late Payment	\$10.00							
Over-the-Credit Limit	None							
Returned Payment	\$30.00							

**How We Will Calculate Your Balance:** We use a method called "average daily balance (including new purchases)" The information about the costs of the cards described in this application is accurate as of August, 2011 This information may have changed after that date. To find out what may have changed, call us at (800) 287-7332 or write to us at 3110-A Inland Empire Blvd., Ontario, CA 91764.



## **UPS Employees**Federal Credit Union

3110-A Inland Empire Blvd. Ontario, CA 91764-6572 (909) 481-2805 • (800) 287-7332 • Fax (909) 484-1167

Office Hours: Mon-Fri 8 a.m. - 5 p.m.
Phone Hours: Mon-Fri 9 a.m. - 5 p.m.
Email address: operations@upscreditunion.org

Home Banking and Bill Pay at www.upscreditunion.org



