



PO Box 159, 915 Kessler Ave
 Helena, MT 59624
 (800) 343-5362 • (406) 443-5400
 Intrepidcu.org

MASTER APPLICATION

Must be completed in ink

NOTICE TO MARRIED APPLICANTS: You have the right to apply for a separate account in your name.

Check the appropriate box to indicate Individual Credit or Joint Credit.

Individual Credit: Complete sections A, B, D and E if only the applicant's income is considered for loan approval. Complete sections A, B, C, D and E: (1) if you are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested; (2) if you reside in a Community Property State; (3) if you are relying on property located in a Community Property State as a basis for repayment of the credit requested; or (4) if you are an Alaska resident subject to a community property agreement or community property trust. Community Property States include: AZ, CA, ID, LA, NM, NV, TX, WA, and WI.

Joint Credit: Complete sections A, B, C, D and E if your co-applicant will be contractually liable for repayment of the loan and initial below:
 We intend to apply for joint credit. _____ (Applicant Initials) _____ (Co-Applicant Initials)

PLEASE CHECK BELOW TO INDICATE THE TYPE OF ACCOUNT(S) AND TYPE OF CREDIT FOR WHICH YOU ARE APPLYING.

Account/Loan: Individual Joint **Credit Cards:** _____ Number of Cards
 (Including ATM/Debit Card Access to the Account if Available) MasterCard Credit Card _____
 Amount Requested \$ _____ If Authorized user, name: _____ Date of Birth: _____
 Purpose/Collateral: _____ **SEE PAGE 4 FOR IMPORTANT INFORMATION ABOUT CREDIT CARDS**
 Other Loan Request _____

A. APPLICANT'S PERSONAL INFORMATION

<small>Check one if you reside in or are relying on property in a community property state or if you are applying for other than individual unsecured credit.</small>						LAST NAME	FIRST NAME	INITIAL	DATE OF BIRTH	SOCIAL SECURITY NO.	
<input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED						CITY	STATE	ZIP	HOW LONG?	HOME PHONE NUMBER	AGES OF DEPENDENTS
PRESENT STREET ADDRESS						CITY	STATE	ZIP	HOW LONG?	DRIVER'S LICENSE NUMBER AND STATE	
PREVIOUS STREET ADDRESS (If present address less than two years)						CITY	STATE	ZIP	HOW LONG?	DRIVER'S LICENSE NUMBER AND STATE	

B. INFORMATION REGARDING APPLICANT

PRESENT EMPLOYER	EMPLOYER'S ADDRESS	CITY	STATE	ZIP	DATE EMPLOYED
OCCUPATION	SUPERVISOR'S NAME	WORK PHONE AND EXT.			
PREVIOUS EMPLOYER	ADDRESS	CITY	STATE	ZIP	HOW LONG? OCCUPATION
REAL ESTATE OWNED AND ADDRESS (Include home)	CITY	STATE	ZIP	DATE PURCHASED	PURCHASE PRICE \$
OTHER INCOME NOTICE: Do not list alimony, child or spousal support or separate maintenance payments unless you wish them considered as a basis for repayment of the credit requested. If listed, verification will be requested.					INCOME \$

C. INFORMATION REGARDING CO-APPLICANT NON-APPLICANT SPOUSE/OTHER GUARANTOR

LAST NAME	FIRST NAME	INITIAL	DATE OF BIRTH	DRIVER'S LICENSE NO. AND STATE	SOCIAL SECURITY NO.
STREET ADDRESS	CITY	STATE	ZIP	HOME PHONE NUMBER	OCCUPATION
PRESENT EMPLOYER'S NAME AND ADDRESS	CITY	STATE	ZIP	DATE EMPLOYED	WORK PHONE AND EXT.
OTHER INCOME NOTICE: Do not list alimony, child or spousal support or separate maintenance payments unless you wish them considered as a basis for repayment of the credit requested. If listed, verification will be requested.					INCOME \$

D. LIST ALL EXISTING DEBTS OF APPLICANT (and Co-Applicant/Non-Applicant Spouse/Other/Guarantor if any part of section C is applicable)

APPLICANT CO-APPLICANT	NAME OF CREDITOR	PURPOSE OR ACCT. #	ORIGINAL AMOUNT	PRESENT BALANCE	MONTHLY PAYMENT
	HOME MORTGAGE OR LANDLORD	<input type="checkbox"/> RENTING <input type="checkbox"/> BUYING	\$	\$	\$
	CREDIT CARD		\$	\$	\$
	OTHER DEBTS		\$	\$	\$
			\$	\$	\$
	AUTOMOBILE LOANS	AUTOMOBILE MAKE, MODEL AND YEAR			
	1.		\$	\$	\$
	2.		\$	\$	\$
	LIST ALIMONY, CHILD SUPPORT OR CHILD CARE PAID MONTHLY				\$

DO NOT OMIT ANY DEBTS! IF MORE SPACE IS NEEDED, USE SEPARATE SHEET. INCOMPLETE APPLICATIONS CANNOT BE PROCESSED. TOTAL MONTHLY OBLIGATIONS \$

If you answer "yes" to any of these questions, provide details below.	ARE ANY OF YOUR DEBTS PAST DUE? <input type="checkbox"/> YES <input type="checkbox"/> NO	HAVE YOU EVER HAD YOUR AUTO, FURNITURE OR PROPERTY REPOSSESSED? <input type="checkbox"/> YES <input type="checkbox"/> NO	HAVE YOU OR YOUR CO-APPLICANT EVER DECLARED BANKRUPTCY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, WHEN: _____	ARE YOU CURRENTLY A CO-MAKER ON A LOAN? <input type="checkbox"/> YES <input type="checkbox"/> NO
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E. FINANCIAL INFORMATION AND REFERENCES

NAME OF BANK OR OTHER FINANCIAL INSTITUTION		CITY	STATE	ZIP	TYPE OF ACCOUNTS <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> LOAN		
NAME OF RELATIVE NOT LIVING WITH YOU	NAME (LAST, FIRST, INITIAL)	PRESENT ADDRESS	CITY	STATE	ZIP	PHONE NUMBER	RELATIONSHIP
PERSONAL REFERENCE NOT RELATED TO APPLICANT	NAME (LAST, FIRST, INITIAL)	PRESENT ADDRESS	CITY	STATE	ZIP	PHONE NUMBER	
PERSONAL REFERENCE NOT RELATED TO APPLICANT	NAME (LAST, FIRST, INITIAL)	PRESENT ADDRESS	CITY	STATE	ZIP	PHONE NUMBER	
PERSONAL REFERENCE NOT RELATED TO APPLICANT	NAME (LAST, FIRST, INITIAL)	PRESENT ADDRESS	CITY	STATE	ZIP	PHONE NUMBER	

STATE NOTICES

OHIO RESIDENTS ONLY: 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.

WISCONSIN RESIDENTS ONLY: Marital Status: Married Unmarried Legally Separated

If married: the name of my spouse is _____

Spouse's SSN: _____ Spouse's Address (if different) _____

Notice: No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened.

MARRIED WISCONSIN RESIDENTS APPLYING FOR AN INDIVIDUAL ACCOUNT: In accordance with Wisconsin Statutes section 766.55(1) by signing here, I state that the credit being applied for, if granted, will be incurred in the interest of the marriage or family of the Borrower(s).

X _____

SECURITY INTEREST

THE GRANTING OF THIS SECURITY INTEREST IS A CONDITION FOR THE ISSUANCE OF CREDIT UNDER THIS APPLICATION.

IF YOUR APPLICATION IS APPROVED, YOU SPECIFICALLY GRANT US A CONSENSUAL SECURITY INTEREST IN ALL INDIVIDUAL AND JOINT ACCOUNTS YOU HAVE WITH US NOW AND IN THE FUTURE TO SECURE REPAYMENT OF CREDIT EXTENDED UNDER THIS AGREEMENT. YOU ALSO AGREE THAT WE HAVE SIMILAR STATUTORY LIEN RIGHTS UNDER STATE AND/OR FEDERAL LAW. IF YOU ARE IN DEFAULT, WE CAN APPLY YOUR SHARES TO THE AMOUNT YOU OWE.

Shares and deposits in an Individual Retirement Account or any other account that would lose special tax treatment under state or federal law if given are not subject to this security interest.

If you have other loans with us, collateral securing such loans will also secure your obligations under this Agreement, unless that other collateral is your principal residence or non-purchase money household goods.

_____ (Applicant Initials) _____ (Co-Applicant Initials)

MASTER APPLICATION SIGNATURES - PLEASE READ BEFORE SIGNING

All the information in this application is true. I understand that section 1014 Title 18 U.S. Code makes it a federal crime to knowingly make a false statement on this application. You have my permission to check it. You may retain this application even if not approved. I understand that you may receive information from others about my credit and you may answer questions and requests from others seeking credit or experience information about me or my accounts with you. If this application is approved, I agree to honor the provisions of the credit agreement and security agreement, and credit card agreement if applicable, covering my account. (If this application is for two of us, this statement applies to both of us.)

Consumer and Credit Report Authorization. By signing this Application, I authorize you to obtain my consumer and/or credit report for the purposes of evaluating this application and to obtain subsequent credit reports on an on-going basis in connection with this transaction, and for all other legitimate purposes, such as reviewing my accounts or taking collection action on the account. I authorize you to receive and review other information about me, such as my employment and income information, from third-parties or consumer reporting agencies.

Vermont Residents: Applicant provided consent via phone _____ (Credit Union Initials)

IMPORTANT NOTICE ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for me: When I open an account, you will ask for my name, address, date of birth, and other information that will allow you to identify me. You may also ask to see my driver's license or other identifying information.

APPLICANT'S SIGNATURE	DATE
X	

OTHER SIGNATURE (Where Applicable)	DATE
X	

HAVE YOU OMITTED ANYTHING? REMEMBER: INCOMPLETE APPLICATIONS CANNOT BE PROCESSED.

FOR CREDIT UNION USE ONLY

LOAN OFFICER:	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> REFERRED TO CREDIT COMMITTEE	CREDIT LIMIT	MC ACCOUNT NO.
		\$	

CONDITIONS

LOAN PROCEEDS INSTRUCTIONS

LOAN OFFICER'S SIGNATURE	DATE	SECOND SIGNATURE	DATE
X		X	

CREDIT COMMITTEE: APPROVED DENIED

CONDITIONS

CREDIT COMMITTEE'S SIGNATURES	DATE	DATE	DATE
X		X	

IMPORTANT CREDIT CARD DISCLOSURES

The following disclosure represents important details concerning your credit card. The information about costs of the card is accurate as of _____. You can contact us toll free at (800) 343-5362 or PO Box 159, 915 Kessler Ave, Helena, MT 59624 to inquire if any changes occurred since the effective date.

INTEREST RATES and INTEREST CHARGES:	
Annual Percentage Rate (APR) for Purchases, Cash Advances, & Balance Transfers	%, % or % depending on your credit history. This APR will vary with the market based on the Prime Rate.
Paying Interest	Your due date is at least 21 days after we mail your billing statement. We will not charge you interest on purchases if you pay your entire new purchase balance by the due date each month. We will begin charging interest on cash advances and balance transfers on the date the cash advance or balance transfer is posted to your account.
Minimum Interest Charge	None
For Credit Card Tips from the Consumer Financial Protection Bureau	To learn more about factors to consider when applying for or using a credit card, visit the website of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore

FEES:	
Fees to Open or Maintain your Account • Annual Fee: • Application Fee:	None None
Transaction Fees • Balance Transfer: • Cash Advance: • Foreign Transaction:	None None 1% of each transaction in U.S. dollars if the transaction involves a currency conversion 1% of each transaction in U.S. dollars if the transaction does not involve a currency conversion
Penalty Fees • Late Payment: • Over-the-Credit Limit: • Returned Payment:	Up to \$25.00 if your payment is late None None

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