FLORIDA HOSPITAL
Credit Union
601 E. Rollins St.
Orlando, FL 32803

LOANLINER®
VISA

Credit Card Application

A table that includes required credit card disclosures is on a separate document provided with this Application. To obtain any change in the required information since it was printed, call us toll free at 1-800-338-0566.

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

☐ **Individual Credit:** You must complete the **Applicant** section about yourself and the **Other** section about your spouse if:

1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI);
2. your spouse will use the account, or
3. you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance, complete the **Other** section to the extent possible about the person on whose payments you are relying.

☐ **Joint Credit:** Each Applicant must **individually** complete appropriate section below. If Co-Borrower is spouse of the applicant, mark the Co-Applicant box.

Guarantor: Complete the **Other** section if you are a guarantor on an account/loan. ☐ **Credit Limit Requested $** _____

APPLICANT

NAME (Last - First - Initial)

ACCOUNT NUMBER | SOCIAL SECURITY NUMBER

DRIVER'S LICENSE NUMBER/STATE | EMAIL ADDRESS

BIRTH DATE | HOME PHONE | BUSINESS PHONE/EXT.

PRESENT ADDRESS (Street - City - State - Zip) | ☐ OWN ☐ RENT | LENGTH AT RESIDENCE

MORTGAGE/RENT OWED TO:

MORTGAGE BALANCE $ | MONTHLY PAYMENT $ | INTEREST RATE %

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: ☐ MARRIED ☐ SEPARATED ☐ UNMARRIED (Single - Divorced - Widowed)

EMPLOYMENT/INCOME

NAME AND ADDRESS OF EMPLOYER | START DATE

NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.

EMPLOYMENT INCOME $_____ Per _____ ☐ NET ☐ GROSS

OTHER INCOME $_____ Per _____ SOURCE

OTHER

☐ CO-APPLICANT ☐ SPOUSE ☐ GUARANTOR

NAME (Last - First - Initial)

ACCOUNT NUMBER | SOCIAL SECURITY NUMBER

DRIVER'S LICENSE NUMBER/STATE | EMAIL ADDRESS

BIRTH DATE | HOME PHONE | BUSINESS PHONE/EXT.

PRESENT ADDRESS (Street - City - State - Zip) | ☐ OWN ☐ RENT | LENGTH AT RESIDENCE

MORTGAGE/RENT OWED TO:

MORTGAGE BALANCE $ | MONTHLY PAYMENT $ | INTEREST RATE %

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: ☐ MARRIED ☐ SEPARATED ☐ UNMARRIED (Single - Divorced - Widowed)

EMPLOYMENT/INCOME

NAME AND ADDRESS OF EMPLOYER | START DATE

NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.

EMPLOYMENT INCOME $_____ Per _____ ☐ NET ☐ GROSS

OTHER INCOME $_____ Per _____ SOURCE

STATE LAW 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: (1) 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. (2) Please sign if you are **not** applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.

X

SIGNATURE FOR WISCONSIN RESIDENTS ONLY | DATE

SIGNATURES

1. You promise that everything you have stated in this application is correct to the best of your knowledge. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension, or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. 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. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions or state chartered credit unions insured by NCUA.

2. You understand that the use of your card will constitute acknowledgment of receipt and agreement to the terms of the credit card agreement and disclosures. You grant us a security interest in all individual and joint share and/or deposit accounts you have with us now and in the future to secure your credit card account. When you are in default, you authorize us to apply the balance in these accounts to any amounts due. Shares and deposits in an Individual Retirement Account, and any other account that would lose special tax treatment under state or federal law if given as security, are not subject to the security interest you have given in your shares and deposits.

X (SEAL)

APPLICANT'S SIGNATURE | DATE

X (SEAL)

OTHER SIGNATURE | DATE

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