

Credit Application Visa Classic		Type of cro	Type of credit requested					
	D Individual relying solely on my own income and assets							
Credit Limit Requested:		🛛 Joint w	ve intend t	o apply	for joint credit			
Mail Card:		Initials Initials						
Branch Pickup:		Credit Li	mit Increa	ise				
Applicant								
Last Name	First				M.I.			
Social Security	Date of Birth		Home Telephone #					
Street Address								
City	State			Zip C	Code			
□ Own □ Rent □ Other	Monthly payment							
Previous Street Address								
City	ate		Zip Code					
Self-Employed? □Yes □No	W	ork Phone						
Employer Name/Address				Work Phone				
Position/Title	Но	ow long?	Gross Monthly Income					
Previous Employer	How long?							
Additional Source of Income	Amount per month							
Nearest Relative (not living with you)								
Home Phone #	,							

\*You do not need to furnish alimony, child support, or maintenance income if you do not want us to consider it in evaluating your application.

Co-Applicant								
Last Name		First					M.I.	
Social Security Date of		Date of H	of Birth Home		Home	ome Telephone #		
Street Address								
City			tate Zip 0			Zip C	ode	
□ Own □ Rent □ Other	Monthly pay	ment	t					
Previous Street Address								
City			State Zi		Zip C	Zip Code		
Self-Employed? □Yes □No			Work Phone					
Employer Name/Address							Work Phone	
Position/Title			How long?	g? Gross Mor		oss Mon	Ionthly Income	
Previous Employer			How long?					
Additional Source of Income			Amount per month					
Nearest Relative (not living with you)								
Home Phone #		Relation	Relationship					

\*You do not need to furnish alimony, child support, or maintenance income if you do not want us to consider it in evaluating your application.

Credit Information	Attach addition	al sheet if necessary.			
Bank Name & Address	Branch		Loans	□Open	□Closed
Checking Account Number/Name Listed		Savings Account N	Number/Na	me Listed	

Na	me & address of creditor	Name under which account is carried	Account number	Balance	Monthly payment
1.	Home mortgage/Rent				
2.	Automobile				
3.	Institution credit card/ Institution name & address				
4.	Other				
5.	Other				

Interest Rate and Interest Charges					
Annual Percentage Rate (APR) for Purchases	18.00%				
	Annual Percentage Rate is fixed				
APR for Balance Transfers	18.00%				
	Annual Percentage Rate is fixed				
APR for Cash Advances	18.00%				
	Annual Percentage Rate is fixed				
How to Avoid Paying Interest on Purchases	Your due date is at least 25 days after the close of each billing cycle. We will not charge any interest on purchases if you pay your entire balance by the due date each month.				
For Credit Card Tips from the Consumer Financial	To learn more about factors to consider when applying for or using a credit				
Protection Bureau	card, visit the website of the Consumer Financial Protection Bureau at				
	http://www.consumerfinance.gov/learnmore				
Fees					
Annual Fees	\$0.00				
Transaction Fees	3% of the Cash Advance transaction amount				
Cash Advance Fee					
Penalty Fees	\$25.00				
Late Payment Fee					
How will we calculate your balance? We use the method ca	lled "average daily balance (including new purchases)."				
Important Credit Disclosure Information Pagarding V	our Application: The above disclosure information is accurate as of March 9, 20				

**Important Credit Disclosure Information Regarding Your Application:** The above disclosure information is accurate as of **March 9, 2015.** This information is subject to change. Therefore, the applicant should contact Visa Card Services of Bank of Botetourt at P.O. Box 339, Buchanan, VA 24066 for information regarding changes in the disclosure.

## SIGNATURE(S)

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: This statement is submitted to obtain credit and I/We certify that all information herein is true and complete. I/We agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of this institution. I/We agree to be bound by the terms and conditions of the cardholder agreement, a copy of which will be mailed to the applicant if this application is granted; receipt of such agreement and acceptance of such terms to be conclusively presumed by the applicant's use. If this is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time.

X		X	
Applicant Signature	Date	Co-Applicant Signature	Date

For Internal Use Only Visa acct. #				
Date Approved		Credit Line		Approved By
Identification Type		Identification #		Expiration Date
ID Viewed by			Under 21?	
Emp #	Initials		Yes	No