

**BARD EMPLOYEES FEDERAL
CREDIT UNION**

111 Spring Street, Murray Hill, NJ 07974

VISA APPLICATION

Phone (908) 277-8130

Fax (908) 277-8302

Credit Limit Desired: _____

- Check One: Individual Account (1 card)
 Joint Account (2 cards)
 Individual Account with authorized users

**APPLICANT
PERSONAL DATA**

Name (As you wish it to appear on the card): _____ Account # _____

Birth Date: _____ Social Security #: _____ Home Phone # _____

List complete home addresses for last FIVE years beginning with current _____ Dates of Residence _____

RENT OWN BOARD

RENT OWN BOARD

RENT OWN BOARD

Directions to residence if address route or P.O. Box _____

Spouse's full name: _____ No. of Dependents OTHER than self: _____ Ages: _____

Highest School Grade Completed or Degree Earned: _____

ASSETS (Please enter "J" before item if jointly owned with co-maker) _____ Value _____ Pledged on a Loan (lien)?

Bank Accounts (Institution & #): _____ \$ _____ Yes No

Home: _____ \$ _____ Yes No

Autos (Make, model, Year): _____ \$ _____ Yes No

Other: _____ \$ _____ Yes No

Other: _____ \$ _____ Yes No

EMPLOYMENT DATA

List all Employers for last five years beginning with current (Names & Addresses) _____ Position _____ Dates of Employment _____

Current Work Phone (& extension): _____ Current Supervisor: _____

Current Gross Income: \$ _____ Per _____ Supervisor's Phone: _____

Other Income: ** \$ _____ Per _____ Source: _____

REFERENCES

Name and address of nearest relative not living with you: _____

Relationship: _____ Phone #: _____

Name and address of a friend (not a relative) : _____

Phone #: _____

**Applicant and Co-Maker
OUTSTANDING OBLIGATIONS**

A = Applicant
C = Co-Maker

List everything you owe, attach another sheet if necessary

Creditor's name & address

Account # Balance Monthly Payment

_____ Mortgage, Rent, or Board _____

_____ Other home liens _____

_____ Auto Loan _____

_____ Credit Union _____

_____ Finance Company _____

_____ Alimony / Child Support _____

_____ Credit Card _____

_____ Other _____

Applicant and Co-maker Must Respond

If a "Yes" answer is given to any question, a full explanation must be attached.

Have you any outstanding judgments? Applicant: Yes No Co-maker: Yes No

In the last 10 years, have you declared bankruptcy? Applicant: Yes No Co-maker: Yes No

***If yes, call for an additional form**

Are you a co-maker on another's loan? Applicant: Yes No Co-maker: Yes No **If Yes:**

For whom: _____ Relationship: _____ Where? _____

SIGNATURES

We rely on the answer to each item on this application. Your application will be returned if you omit any item. Please complete neatly in ink, or type. If additional room is needed to fully complete any question, use an attachment. **NO INCOME CAN BE CONSIDERED UNLESS OFFICIAL DOCUMENTATION IS ATTACHED.** **You are only required to reveal all sources of income if they are to be used in determining your creditworthiness.

I authorize Bard Employees Federal Credit Union to contact any person, association, firm, reporting bureau, or corporation and for same to provide any and all information concerning my affairs. Anyone who signs as a co-maker agrees as well.

Applicant's Signature: _____ Date: _____

Co-maker's Signature: _____ Date: _____

CO-MAKER PERSONAL DATA

Name: _____ Birth Date: _____ Account # _____

Nick Name: _____ Social Security #: _____ Home Phone # _____

Relationship to Applicant: _____

List complete home addresses for last FIVE years beginning with current _____ Dates of Residence _____

RENT OWN BOARD

RENT OWN BOARD

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