

LOAN APPLICATION

ACCOUNT NUMBER – APPLICANT	ACCOUNT NUMBER – CO-APPLICANT	DATE
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Applicant Information PRINT OR TYPE ALL INFORMATION

1. If You live in a community property state, are You:
 Married Separated Unmarried (Includes Single, Divorced and Widowed)

2. Married applicants can apply for individual credit. Indicate if You would like:
 Individual Credit Joint Credit

3. Method of Payment:
 Payroll Deduction Automatic Transfer Coupons

4. Frequency of Payment: Weekly Bi-Weekly Semi-Monthly Monthly

Spouse/Co-Applicant Information

5. Complete Spouse/Co-Applicant information only if any of the following apply:
 a. This is for joint credit with Your Spouse or other Co-Applicant.
 b. Your Spouse will use Your Account.
 c. You're relying on Your Spouse's income as a source of repayment for the credit requested.
 d. You live in a community property state: Arizona, California, Idaho, Louisiana, New Mexico, Nevada, Texas, Washington, Wisconsin (or Puerto Rico).

6. Definitions
 Whenever used in this application, the words "You" and "Your" refer to the applicant(s), and the words "We," "Us," and "Our" refer to the Lender.

Credit Applied For:

<input type="checkbox"/> Classic VISA - No. of Cards _____	<input type="checkbox"/> Secured (Please include a copy of purchase invoice)	Credit Limit Applied For \$ _____
<input type="checkbox"/> Secured VISA - No. of Cards _____	<input type="checkbox"/> _____	Purpose of Loan _____
<input type="checkbox"/> Overdraft Protection	<input type="checkbox"/> _____	Amount Applied For \$ _____
<input type="checkbox"/> VIP Plus Line of Credit	<input type="checkbox"/> _____	Collateral Offered _____

There are costs associated with the use of any Credit Card issued to You by Us. You may request specific information about these costs by contacting Us by telephone at (800) 696-6009 or by writing Us at 1040 Leigh Avenue, San Jose, CA 95126-4129.

APPLICANT

FIRST NAME		INITIAL	LAST NAME	
SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER/STATE		BIRTHDATE
CURRENT STREET ADDRESS			YEARS THERE	
CITY		STATE	ZIP	
EMAIL ADDRESS				
FORMER ADDRESS (COMPLETE IF PREVIOUS ADDRESS IS LESS THAN 3 YEARS)				YEARS THERE
DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT	HOME TELEPHONE	NO. OF DEPENDENTS	AGES OF DEPENDENTS	
<input type="checkbox"/> PAY BOARD				
NAME, ADDRESS AND TELEPHONE OF NEAREST RELATIVE NOT LIVING WITH YOU				RELATIONSHIP

SPOUSE CO-APPLICANT

FIRST NAME		INITIAL	LAST NAME	
SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER/STATE		BIRTHDATE
CURRENT STREET ADDRESS			YEARS THERE	
CITY		STATE	ZIP	
EMAIL ADDRESS				
FORMER ADDRESS (COMPLETE IF PREVIOUS ADDRESS IS LESS THAN 3 YEARS)				YEARS THERE
DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT	HOME TELEPHONE	NO. OF DEPENDENTS	AGES OF DEPENDENTS	
<input type="checkbox"/> PAY BOARD				
NAME, ADDRESS AND TELEPHONE OF NEAREST RELATIVE NOT LIVING WITH YOU				RELATIONSHIP

EMPLOYMENT AND INCOME

If self-employed or retired, attach financial statement or last 2 years income tax returns.

CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE)		EMPLOYMENT DATE	
ADDRESS/CITY/STATE/ZIP			
WORK TELEPHONE	POSITION	GROSS INCOME	
FORMER EMPLOYER	POSITION	DATES THERE	

CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE)		EMPLOYMENT DATE	
ADDRESS/CITY/STATE/ZIP			
WORK TELEPHONE	POSITION	GROSS INCOME	
FORMER EMPLOYER	POSITION	DATES THERE	

OTHER INCOME

You need not list income from alimony, child support or separate maintenance payments unless You want it considered in evaluating this credit application.

TYPE OF OTHER INCOME	MONTHLY AMOUNT

TYPE OF OTHER INCOME	MONTHLY AMOUNT

ASSETS AND DEPOSITS

Attach a separate sheet if necessary.

TYPE	BANK (OR OTHER) NAME & ADDRESS	APPROX. BAL.

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