

C.U.P. Federal Credit Union Checking Account Application

D/I _____ Score _____
 Sig Loan Limit _____
 Approve Deny

Check Order

Account Number _____

Name, address and phone # (as you want it to appear on checks)

	Style Code Date	#Boxes	Start Ck #
	Typestyle		
	Corner Accent Signature Line?	Center Accent	2 nd
	Sig. Line Message:		

Please open a checking account in my name.

Applicant _____ Date _____ Co-applicant _____ Date _____

Overdraft Loan Protection Application

You may apply for a line of credit to cover overdraft checks. The total of your overdraft limit and your open end signature loan limit cannot exceed \$6500. We may request additional information for a limit over \$500. Please select the limit you prefer.

\$200 \$500 \$1000 \$2000 \$3000

Gross monthly income (before taxes or other withholdings): _____

Monthly payments (exclude utilities):

Creditor	Pmt.	Creditor	Pmt.

We will not send a notice if you overdraft and a loan is established. Some people use their overdraft loan on a daily or weekly basis so it is not cost effective to send notices each time. Your transactions will appear on your monthly statement.

If a balance remains on an overdraft loan at the end of the month, a minimum payment will be calculated and paid from your checking.

I understand the terms of an overdraft protection line of credit and authorize the credit union to obtain a credit report in connection with this application.

Applicant _____ Date _____ Co-applicant _____ Date _____

Debit Card Application

Yes! I would like a Debit Card. I would like a 2nd card to be embossed with the person named below as a joint owner on the account.

Name _____ Relationship _____

Social Security # _____ Birth Date _____

If a Debit Card(s) is issued, I (we), the undersigned applicant(s), by signing or using the Debit Card(s) ("card") agree that I (we) will be bound by the terms of the Debit Card agreement and disclosure which will be furnished to me (us). I (we) agree to surrender the card(s) upon demand and authorize the credit union to obtain credit reports in connection with this application and for any update or renewal of the card(s).

Signature _____ Date _____ Signature _____ Date _____