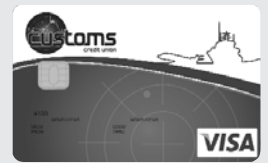




Visa Credit Card Application/Alteration Form

Instructions

1. For Credit Card applications or credit limit increases, please complete all sections.
2. For additional cardholder applications, please complete sections 1,3,10 and 11 only.
3. Please complete the application form using capitals, black or blue ink only.



Customs Credit Union is a wholly owned division of Police Credit Union (PCU). This form may make references to PCU.

1. Membership Details

please appropriate boxes

I am a new Member

My existing Member / Client number is _____

2. Instructions

1. I wish to apply for a Customs Credit Union Visa Credit Card

2. I understand that to be eligible for a Customs Credit Union Visa Credit Card

- I must be a Customs Credit Union member (a division of PCU)
- I am at least 18 years of age
- I am a permanent Australian resident
- I have a good credit rating
- The product is offered by PCU

3. Please one of the following:

I would like to request a credit limit of: \$ _____

I would like to increase my existing credit limit to: \$ _____

I understand my application is subject to your normal credit assessment and the credit limit may be approved lower than the requested amount.

3. My Personal Details

please appropriate boxes

Title: Mr Mrs Ms Miss Other (Specify)

Surname:

Given Names:

Residential address:

Postcode:

E-mail address:

Postal Address (if different):

Postcode:

Home no. () _____ Mobile no. _____

Work no. () _____ D.O.B. DD / MM / YY

Home Ownership status (please tick) Date commenced at this address

- Owner Buying Renting
 Boarding Living with Parents

DD / MM / YY

Previous address (if less than 5 years):

Postcode: How long at address: YY / MM

Marital status (please tick) Single Married Defacto Separated Divorced Widowed No of Dependants:

Drivers Licence number: Expiry Date: DD / MM / YY

4. Relatives Details

Relatives' details (below are the contact details of my nearest relative not living with me):

Name of nearest relative:

Relationship to relative:

Address:

Home No. () _____ Mobile No. _____

5. Employment

Employer:

Employer's address:

Postcode:

Occupation (if self-employed, name and nature of business):

Employer's Telephone Number:

Date Started: DD / MM / YY

Employment status (Please tick)

- Full Time Part-Time
 Casual Self-employed

Previous employer (if less than 3 years with current employer):

Employer's address:

Postcode:

Occupation:

Employer's phone number: ()

Period of Employment: From DD / MM / YY to DD / MM / YY

Employment status (please tick) Full-time Part-time Casual Self-employed

Please include current pay slips, confirmation of other income and evidence of current liabilities. If self-employed, please include three full year's financial statements.

6. Income

		Please Circle
Net Salary (after tax) from your regular employer	\$ _____	Wkly / Mthly / Fnghtly
Regular overtime, allowances	\$ _____	Wkly / Mthly / Fnghtly
Other income (specify):	\$ _____	Wkly / Mthly / Fnghtly
	\$ _____	Wkly / Mthly / Fnghtly
Total Income	\$ _____	Wkly / Mthly / Fnghtly

7. Assets

	Estimated Value
Motor Vehicle(s)	
Make: _____ Model: _____ Year: _____	\$ _____
Make: _____ Model: _____ Year: _____	\$ _____
Property: Home	
Address: _____	\$ _____
Property: Investment	
Address: _____	\$ _____
Savings/Term Deposits:	\$ _____
Shares & other investments:	\$ _____
Contents/Household goods:	\$ _____
Other Assets:	\$ _____
Total Assets	\$ _____

8. Liabilities

	Balance Owning	W/F/M Repayments
Existing mortgage, rent or board: Payable to: _____ \$ _____ \$ _____		
Personal Loan/Car Loan: Financial Institution: _____ \$ _____ \$ _____		
Credit Cards: Financial Institution: _____ Type: _____ \$ _____ \$ _____	Limit	
Credit Cards: Financial Institution: _____ Type: _____ \$ _____ \$ _____	Limit	
Store/Retail Cards Type: _____ \$ _____ \$ _____	Limit	
Store/Retail Cards Type: _____ \$ _____ \$ _____	Limit	
Other Loans: Financial Institution: _____ \$ _____ \$ _____		
Other Loans: Financial Institution: _____ \$ _____ \$ _____		
Other Loans: Financial Institution: _____ \$ _____ \$ _____		
Maintenance / Child Support Payable to: _____ \$ _____ \$ _____		
Total Commitments		\$ _____

9. Automatic Payment Request

please appropriate boxes

Yes, I would like to have monthly automatic payments made to my Visa Credit Card from my CCU Account No. (please specify)

A/C Type (eg S1).....

Please tick one of the following options listed below:

My minimum payment as shown on my statement.

Set monthly amount (please specify) \$.....

Please note: The set monthly amount is to exceed the minimum payment required.

My full outstanding balance shown on my statement

OR

I will arrange payments myself.(eg. via internet banking, send cheque)

10. Additional Card (Optional)

I confirm the identity of and wish to apply for an Additional Card in the name of:

First Name	Middle initial	Surname
_____	_____	_____

Existing CCU Member number (if applicable): _____

Additional Cardholder's Date of Birth

_____/_____/_____

SIGN HERE

X _____ Date: / /

Please note: Additional Cardholder must be at least 16 years of age. All transactions made using the additional card will be the responsibility of the primary cardholder.

11. Privacy Declarations

Applicant's Declarations:

By signing below, I (the applicant) confirm that:

- I understand that the Credit Union is the product issuer.
- All statements in my application are true, correct, complete and not misleading and I realise the Credit Union is relying on this.
- I am not a current bankrupt, discharged bankrupt or have any judgements or legal proceedings against me that I have not disclosed.
- I am giving the Privacy Consent and Acknowledgement set out below.
- I acknowledge that this application is not an agreement to lend.

VISA CREDIT CARD OPERATION

- I acknowledge that you have notified me that you have terms and conditions governing the operation of the Visa Credit Card with you.
- I understand your Visa Credit Card terms and conditions and acknowledge that you may alter those terms and conditions from time to time.
- I agree to be bound by your Visa Credit Card terms and conditions as altered from time to time by you.

PRODUCT DISCLOSURE DOCUMENTS

- I agree to receive the Financial Services Guide (FSG) for this via the CCU website or in brochure form.
- I understand that I should read the FSG before taking up any product and that I can download the FSG to my personal computer.
- I agree and understand written confirmation of the opening or closing of any product is available by calling 131 728.

Signature of Applicant

Please print name: _____

X _____ **SIGN HERE** _____ Date / /

Privacy Consent and Acknowledgement

By signing above, I **specifically acknowledge, agree and consent** to each of the things set out in the booklet " Privacy Guidelines" (a copy of which was given to me when I became a Member of CCU) and as follows:

1. CCU has informed me that CCU may disclose limited information about me to a credit reporting agency.

2. CCU may give personal information about me (including information about my commercial credit worthiness or my personal credit worthiness) to or obtain it from:

- any credit reporting agency;
- any credit provider named in a credit report about me held by a credit reporting agency;
- any guarantor or prospective guarantor of any obligation of mine; or
- any mortgage insurer or prospective mortgage insurer of any obligation of mine;

And it or they may use that information:

- to assess my credit worthiness, **this application** for credit and their position in respect of it;
- to manage my accounts and help me avoid credit defaults;
- to notify defaults and collect any overdue payments; and
- to investigate and respond to matters if CCU or another believes a serious credit infringement has occurred in respect of me or my account
- otherwise as required or permitted by law.

AND this applies whether this application is for commercial or personal credit or both.

3. CCU may also give personal information about me to or obtain it from:

- any person authorised by me, such as, but not limited to my financial counsellor, broker, adviser or agent;
- any proposed assignee of my debt or anyone participating in a loan securitisation program for the purpose of such a program.
- any organisation that provides services to CCU in respect of my account, such as mailing houses, collection agencies in each case on a confidential basis: and they or CCU may use that information:
- to assess my or their position in respect of my account; and
- for the purposes of providing administration, sales, marketing or other services in respect of my account and to determine whether I am eligible to receive any benefits relating to my account or otherwise,

BUT if the information is relevant to my credit history, credit capacity, credit standing or credit worthiness, CCU will not use or disclose the information unless the credit reporting requirements of the Privacy Act are satisfied.

4. If I give CCU information about any third party, it is with their consent and I will tell the third party about the rights described in the brochure "Privacy Guidelines", which apply also to the third party's personal information.

5. My consent as given above remains in force until either my application is rejected or I repay the full amount owing to CCU and close all my accounts with it.

If this consent was first obtained verbally, after the **bold italicised words** were read over the phone, the applicant consented to them.

Staff Member Name _____

Staff Member Signature _____ Date / /

Privacy Policy Declaration (for shared commitments)

I _____ acknowledge that Customs Credit Union is retaining my payslip on file for the purposes of this loan application for _____ and I have been informed as to where I can obtain a copy of the Credit Union's current Privacy Guidelines (www.customscu.com.au).

Name [Please Print] _____

Signature _____ Date / /