

# Easy as 1 - 2 - 3

Three simple steps to manage your Visa Credit Card account with Crouse Federal Credit Union.

## 1. Visit [www.eZcardInfo.com](http://www.eZcardInfo.com)

A fully protected website. At this site, once enrolled, you can make your payments online 24/7, check your balance, available credit, view account history and sign up for E-statements.

## 2. Sign up for Auto Pay

You can have payments withdrawn automatically from your credit union account.

## 3. Call or Visit the credit union

By doing so you may make payments. You can also request a cash advance. \* Or Use your card for cash advances at ATMs

### Call us

315-470-7928

### Write us

[creditunion@crouse.org](mailto:creditunion@crouse.org)

### Visit us

730 S. Crouse Ave. Room 228  
Syracuse, NY 13210

For office hours and more information, please visit our website at [www.crousefcu.com](http://www.crousefcu.com).

### Follow us

[www.crousefcu.com](http://www.crousefcu.com)

\*See Fee Schedule

Please ask about valuable Credit Disability and Credit Life Insurance Payment Protection.

Think Green....Save Gold!!

View your statements online. Enroll for e-statements for your credit union statements and credit card statements.

### With E-statements:

- Receive statements faster
- E-statements won't get lost in the mail
- Safe, secure and free
- Read our newsletter online

### Lost or Stolen Card

- Call our 24 hour card services at 1-800-325-3678.
- Call Crouse Federal Credit Union at 315-470-7928 to request a new card.
- Review your account activity.

### Loan Programs

- New and Used Car Loans
- New and Used Boat/RV Loans
- Bill Consolidation Loans
- Home Improvement Loans
- Healthy Choice Loans
- Auto Refinance Loans
- Mortgage Options (provided by Ownerschoice Funding)
- Student Loans (provided by Sallie Mae)

# VISA Charge Card Application



## Also Available

## Secured Credit Card

*Rebuild your credit the CU way*

# CROUSE FEDERAL CREDIT UNION

730 S. Crouse Ave. Room 228  
Syracuse, NY 13210

**Phone:** (315) 470-7928

**Fax:** (315) 470-5633

[www.crousefcu.com](http://www.crousefcu.com)

**Crouse Credit Union  
VISA Charge Card....  
The One (1) card to have!**



**Qualified borrowers will receive these benefits:**

- *Low Fixed Rate*
- *No annual fee*
- *Low cash advance fees*
- *Low balance transfer fees*
- *5-day grace period for payments*
- *25-day grace period for purchases*
- *Maximum \$10,000 Credit Limit*
- *Online access available at [www.eZcardinfo.com](http://www.eZcardinfo.com)*

**\*You're Pre-Approved!**

**Just fill out the short application.**

Fax it to: 315-470-5633

Email it to: [creditunion@crouse.org](mailto:creditunion@crouse.org)



**Looking to Start or Re-Build your Credit?  
A Secured Credit Card Can Help.**

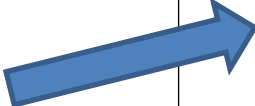
It is a real credit card that helps you build or improve your credit score.

Funds you have on deposit at the credit union are used as collateral for the credit card.

- *Credit limits up to \$1,000.00*

\*Annual Fee required

*\*Annual Percentage Rates, terms and type of credit card will be determined by the member's credit rating/credit score from Experian. Maximum lending limits apply. Subject to change without notice.*



**Get the spending Power that a  
Crouse VISA charge card provides.**



**The VISA Charge card from Crouse Credit Union delivers card-based convenience to pay for purchases almost everywhere you go!**

**Why use high-rate store cards? Transfer your existing balance to Our Card!  
The Crouse Credit Union VISA Charge card offers some of the best fixed rates around  
and some of the lowest transfer fees!**

**Credit Card Application**

**Limit Requested:** \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
 Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Drivers license # \_\_\_\_\_ State Issued \_\_\_\_\_  
 Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Email \_\_\_\_\_  
 Employer \_\_\_\_\_ Employer Phone # \_\_\_\_\_ Employee ID # \_\_\_\_\_  
 Income Gross \$ \_\_\_\_\_ Per \_\_\_\_\_ Please indicate \_\_\_ Own \_\_\_ Rent

**Indicate if you would like valuable Member Choice Payment Protection insurance for your credit card.**

Disability \_\_\_\_\_ Life \_\_\_\_\_ Disability and Life \_\_\_\_\_ None \_\_\_\_\_

*Are there any unsatisfied judgments, garnishments or lawsuits pending against you?  Yes  No If "Yes" provide amounts \_\_\_\_\_*

*Have you declared bankruptcy in the last 10 years?  Yes  No If "Yes", provide date, place of filing. \_\_\_\_\_*

**Notice to New York Residents: New York residents may contact the New York State Department of Financial Services to obtain a comparative listing of credit card rates, fees, and grace periods. New York State Department of Financial Services: 1-800-342-3736 or [www.dfs.ny.gov](http://www.dfs.ny.gov).**

**CONSENSUAL SECURITY INTEREST**

You grant us a security interest in all individual and joint share and/or deposit accounts you have with us now and in the future to secure your credit card account. Shares and deposits in an IRA or any other account that would lose special tax treatment under state or federal law if given as security are not subject to the security interest you have given in your shares and deposits. You may withdraw these other shares unless you are in default. When you are in default, you authorize us to apply the balance in these accounts to any amounts due. For example, if you have an unpaid credit card balance, you agree we may use funds in your account(s) to pay any or all of the unpaid balance.

By signing or otherwise authenticating below, you are affirmatively agreeing that you are aware that granting a security interest is a condition for the credit card and you intend to grant a security interest.

You acknowledge and agree that your pledge does not apply during any periods when you are a covered borrower under the Military Lending Act. For clarity, you will not be deemed a covered borrower, and your pledge will apply, if: (i) you become obligated on a credit transaction or establish an account for credit when you are not a covered borrower; or (ii) you cease to be a covered borrower.

**X Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

By signing or otherwise authenticating below:

1. You promise that everything you have stated in this application is correct to the best of your knowledge, and that the above information is a complete listing of what you owe. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension, or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a crime to willfully and deliberately provide incomplete or incorrect information in this application.

2. If you are applying for a credit card, you understand that the use of your card will constitute acknowledgment of receipt and agreement to the terms of the Consumer Credit Card Agreement and Disclosure.

**X Signature** \_\_\_\_\_ **Date** \_\_\_\_\_