Interest Rates and Interest Charges	Visa®						
Annual Percentage Rate (APR) for Purchases	Platinum 13.50% Variable Prime Rate + 5%						
APR for Balance Transfers	13.50% Variable						
APR for Cash Advances	15.50% Variable						
Penalty APR and When it Applies	None						
Paying Interest	Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on retail purchases and/or balance transfers if you pay your entire balance by the due date. We will begin charging interest on cash advances on the transaction date.						
Minimum Interest Charge	None						
For Credit Card Tips from the Consumer Financial Protection Bureau	To learn more about factors to consider when applying for or using a credit card, visit the web site of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore.						
Fees	Visa® Platinum						
Annual Fee	\$25.00 Annual fee waived with deposit relationship.						
Transaction Fees							
Balance Transfer	3% or \$5 whichever is greater						
Cash Advances	5% or \$10 whichever is greater						
Foreign Transaction	Up to 1.0 %						
Penalty Fees							
Late Payment	Up to \$30.00						
Over-the-Credit Limit	None						
Returned Payment	Up to \$30.00						
Other Fees	None						

How We Will Calculate Your Balance: We use a method called "average daily balance" (including new purchases).* An explanation of this method is provided in your account agreement. Billing Rights: Information on your rights to dispute transactions and how to exercise those rights is provided in your account agreement.

CREDIT APPLICATION

Credit Limit Requested \$ ____ \$5,000.00 Minimum Request

(Sig Visa® Platinum

Check Account	t Choice:
gnature required for	joint applicant)

o Joint Account We intend to apply for joint credit Applicant Initials __Co-Applicant Initials

0	Cr	edi	t Lir	ie Ii	ncrea	ise

o Individual Account

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, Federal laws require all financial institutions to obtain, verify and record information that identifies each person who opens an Account. What this means to you: When you open an Account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

	Last Name			First			Middle			Social Security Number
APPLICANT Note: All applicable sections should be filled out completely to avoid delay in processing your application.	Date of Birth	No. of Depende	ents	Home Phone		Cell Phone		Own	Rent Other	Monthly Payment \$
	Current Address			City		State	Zip Code		How Long (yrs)	
	Mailing Address (if different from above)			City			State	Zip Code		How Long (yrs)
	Previous Address (if less than 2 years at present address)			City			State	Zip Code		How Long (yrs)
	Employer			Self Employed o Yes o No			Work Phone		Date Employed	
	Address				Position/Occupation			Monthly Gross Income \$		
	Name and Address of Previous Employer (if less than 2 years at present employer)								How Long (yrs)	
	Source of Additional Income: Income from alimony, child support or separate maintenance need not be revealed if it is not considered in determining creditworthiness								Amount per Month \$	
	Nearest Relative (Not Living With Y					Home Phone ()		Relationship		
CO-APPLICANT Intended for joint applicant, this information is not required for an individual account.	Last Name	Last Name		First			Middle			Social Security Number
	Date of Birth	No. of Depende	ents	Home Phone ()	Home Phone		Cell Phone ()		Rent Other	Monthly Payment \$
	Current Address			City			State	Zip Code		How Long (yrs)
	Previous Address (if less than 2 years at present address)			City			State	Zip Code		How Long (yrs)
Differment information	Employer			Self Employed o Yes o No			Work Phone		Date Employed	
	Address				Position/Occupation		Monthly Gross Income \$			
0	≥Name and Address of Creditor		Name under W	Which Account is Carried		Account Numbe	er Balance			Monthly Payment
L INF	Home Mortgage/Rent									
CREDIT INFO Attach Additional	愛. Bank Credit Card/Bank Name and Address									
12	DI EASE DEAD THE EQUI OWING CA	DECILL V DECO	E SICNING: This	statament is submitt	ad to obtain aradit a	nd I/wa partify that a	all information haroi	io truo and a	omplete IMA care	a that inquiries may be made to
S	PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: This statement is submitted to obtain credit and I/we certify that all information herein is true and complete. I/We agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of this institution. I/We agree to be bound by the terms and conditions of the cardholder agreement, a copy of which will be mailed to the applicant if this application is granted, receipt of such agreement and acceptance of such terms to be conclusively presumed by the applicant is use. If you intend to apply for joint credit, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. We may report information about your account to the credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.									
路	cardholder agreement, a copy of which will be mailed to the applicant if this applicant in this applicant is granted, receipt of such agreement and acceptance of such terms to be conclusively presumed by the applicant suse. If you intend to									
F	apply for joint credit, the undersigned shother defaults on your account may be re	all be jointly and se effected in vour cre	verally liable for any dit renort	and all credit extend	ded from time to time	e. we may report into	ormation about your	account to the	credit bureaus. Lat	e payments, missed payments, or
≨	X	χ								
SIGNATURES	Applicant Signature Date Co-Applicant Signature							Date		
¥ .⊢	Upon approval, I wish to transfer my	y present balance	e on the credit ca	rd account(s) liste	d below to my nev	v credit card acco	unt.			
202	o Credit Card Account Number Amount to be transferred \$								S	
IRANSFER OF BAL REQUEST										
FOR ITERNAL SE ONLY	Date Approved									
SEON	Credit Line			Officer's Signature				Branch Number		

 $United\,Bank, Atmore, AL\,36504-9988$

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