



North Dakota State University  
**Affiliate Credit Card**  
with SCORECARD Benefits



# Credit Application

**Check Account Choice**  Individual Account  
 Joint Account (Initials required for joint application) Initials \_\_\_\_\_  
 Credit Line Increase

**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.

<b>Applicant</b> <small>Note: All applicable sections should be filled out completely to avoid delay in processing your application.</small>	Last Name		First		Middle			Social Security		
	Date of Birth		No. of Dependents		Home Phone		Cell Phone		Own <input type="checkbox"/> Rent <input type="checkbox"/> Other <input type="checkbox"/>	Monthly Payment \$
	Current Address				City		State		Zip Code	How Long (years)
	Previous Address				City		State		Zip Code	How Long (years)
	Employer			Self Employed			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 (years)			
	Source of Additional Income. Income from alimony, child support or separate maintenance. Need not be revealed if it is not considered determining creditworthiness									Amount per month \$
	Nearest Relative (not living with you)			Home Phone			Relationship			
	<b>Co-Applicant</b> <small>Information about a Co-Applicant is not required for an individual account.</small>	Last Name		First		Middle			Social Security	
Date of Birth		No. of Dependents		Home Phone		Cell Phone		Own <input type="checkbox"/> Rent <input type="checkbox"/> Other <input type="checkbox"/>	Monthly Payment \$	
Current Address				City		State		Zip Code	How Long (years)	
Previous Address				City		State		Zip Code	How Long (years)	
Employer			Self Employed			Work Phone		Date Employed		
Address			Position/Occupation			Monthly Gross Income \$				
Source of Additional Income. Income from alimony, child support or separate maintenance. Need not be revealed if it is not considered determining creditworthiness.									Amount per month \$	
<b>Credit Info</b> <small>Attach Additional Sheet if Necessary.</small>	Name and Address of Creditor		Name Under Which Account is Carried			Account Number		Balance	Monthly Payment	
	1. Home Mortgage/Rent									
2. Bank Credit Card/Bank Name and Address										
<b>Signatures</b>	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. The offer is subject to all 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's use. If this is a joint application, 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.									
	X _____ Applicant Signature				Date		X _____ Applicant Signature			
<b>Transfer Of Bal. Request</b>	Upon approval, I wish to transfer my present balance on the credit card account(s) listed below to my new credit card account.									
	Credit Card Account Number _____				Amount to be transferred \$ _____					
<b>For Internal Use Only</b>	X _____ Signature									
	Visa Account No. _____									
	Date Approved			Credit Line			Approved By			

**Access your Credit Card Online:** [mycardstatement.com](http://mycardstatement.com)  
View Transactions • Make Payments • Access eStatements

**SCORECARD Benefits:**  
Redeem for Merchandise, Travel, and Cash Back Rewards  
Visit [scorecardrewards.com](http://scorecardrewards.com) for a full list of card benefits.

**First Western Bank & Trust**  
**Affiliate Credit Card**  
Account Opening Disclosure  
Summary of Terms

Interest Rates and Interest Charges	
<b>Annual Percentage Rate (APR) for Purchases</b>	<b>15.99%</b>
<b>APR for Balance Transfers</b>	<b>15.99%</b>
<b>APR for Cash Advances</b>	<b>24.99%</b>
<b>Penalty APR</b>	<b>N/A</b>
<b>Paying Interest</b>	Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on purchases if you pay your entire balance by the due date each month. We will begin charging interest on cash advances and balance transfers on the transaction date.
<b>Minimum Interest Charge</b>	<b>None</b>
<b>For Credit Card Tips from the Consumer Financial Protection Bureau</b>	<b>To learn more about factors to consider when applying for or using a credit card, visit the website of the Consumer Financial Protection Bureau at <a href="http://www.consumerfinance.gov/learnmore">http://www.consumerfinance.gov/learnmore</a></b>
Fees	
<b>Annual Fee</b>	<b>None</b>
<b>Transaction Fees:</b>	
<ul style="list-style-type: none"> <li>• Balance Transfer</li> <li>• Cash Advance</li> <li>• Foreign Transaction</li> </ul>	<b>None</b> Either <b>\$5 or 3%</b> of the amount of each transfer; whichever is greater. <b>1%</b> of each transaction in U.S. dollars.
<b>Penalty Fees:</b>	
<ul style="list-style-type: none"> <li>• Late Payment</li> <li>• Over-the-Credit Limit</li> <li>• Returned Payment</li> </ul>	Up to <b>\$20.00</b> <b>None</b> Up to <b>\$25.00</b>
<b>Other Fees:</b>	
<ul style="list-style-type: none"> <li>• Expediated Shipping</li> </ul>	<b>\$30.00</b> per card

**How We Calculate Your Balance:** We use a method called “**average daily balance** (including new purchases).” See your account agreement for more details.

**Billing Rights:** Information on your rights to dispute transactions and how to exercise those rights is provided in your account agreement.

**Changes:** We may add, change, or delete any of the terms of your Account and the corresponding Credit Card Agreement (including, but not limited to, Annual Percentage Rate, and other significant changes). Your Annual Percentage Rate will not increase during the first year of Account Opening. If your rate is increased, it will only apply to new transactions, 14 days after the effective date, of the rate increase. A notice of the increase will be sent to you at least forty-five (45) days prior to the effective date of the change. The notice will include a statement of your right to reject the changes. If you reject the changes, we may cancel your account.

**Protection to Members of the Armed Forces and Their Dependents:** Federal law provides important protections to members of the Armed Forces and their dependents relating to extensions of consumer credit. In general, the cost of consumer credit to a member of the Armed Forces and his or her dependent may not exceed an annual percentage rate of 36 percent. This rate must include, as applicable to the credit transaction or account: The costs associated with credit insurance premiums; fees for ancillary product sold in connection with the credit transaction; any application fee charged (other than certain application fees for specified credit transactions or accounts); and any participation fee charged (other than certain participation fees for a credit card account).

The information about the costs of the credit card account described in this disclosure is accurate as of August 2022; this information may have changed after that date. To find out what may have changed, please call 701-852-3711 (toll free: 800- 688-2584) or contact First Western Bank & Trust, PO Box 1090, Minot, ND 58702-1090. You agree that a credit report may be used in making the credit granting decision.

