

**Dakota Plains Credit Union**

212 5<sup>th</sup> Ave., PO Box 248, Edgeley, ND 58433 (701) 493-2334  
120 1<sup>st</sup> St. N, PO Box 129, Ellendale, ND 58436 (701) 349-3842  
201 4<sup>th</sup> Ave, #4, PO Box 74, Enderlin, ND 58027 (701) 437-2324

**Individual Credit**

**Joint Credit**

**Consumer Loan** \_\_\_\_ **VISA Credit Card:** \_\_\_\_ **Amount Requested:** \_\_\_\_ **Purpose:** \_\_\_\_

Name: \_\_\_\_\_ Social Security # \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone # \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Length of Residence: \_\_\_\_\_

Monthly Rent/Mortgage Payment: \$ \_\_\_\_\_ Net Monthly Income: \$ \_\_\_\_\_

Employer: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

E-Mail Address \_\_\_\_\_

**Joint Applicant Information**

Name: \_\_\_\_\_ Social Security # \_\_\_\_\_

Employer: \_\_\_\_\_ Net Monthly Income \$ \_\_\_\_\_ Length of Employment: \_\_\_\_\_

Signature: I certify that everything I have stated in this application is correct. By signing below, I authorize you to check my credit and employment history. This authorization will continue until cancelled in writing. If approved and a VISA card(s) is issued, you understand that the use of your card will constitute acknowledgment of receipt and agreement to the terms of the credit card agreement.

\_\_\_\_\_  
Applicant's Signature Date

\_\_\_\_\_  
Joint Applicant's Signature Date