

A. General Application Information

INDIVIDUAL APPLICATION: Check here if this is an application for an individual and you are relying on your own income and not the income of another person as the basis for repayment of the credit requested. Please complete Sections A & B, as well as sign this application (Section E).

JOINT APPLICATION: Check here if this an application for joint credit involving you and another person. Please complete Sections A, B & C and ensure both parties acknowledge their intent directly below as well as sign at the end of this application (Section E).

VISA® Classic VISA® Gold | New Card: Limit Requested \$ _____ Increase Credit Limit To \$ _____ Additional Card

B. Information about Applicant

Last Name		First Name	
Middle Name	Social Security Number	Date of Birth	
Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, are you a lawful Permanent Resident Alien? <input type="checkbox"/> Yes <input type="checkbox"/> No Alien Registration # _____		
ID Number	ID Type	ID Issue by	
ID Issue Date		ID Expiration Date	

C. Information about Co-Applicant

Last Name		First Name	
Middle Name	Social Security Number	Date of Birth	
Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, are you a lawful Permanent Resident Alien? <input type="checkbox"/> Yes <input type="checkbox"/> No Alien Registration # _____		
ID Number	ID Type	ID Issue by	
ID Issue Date		ID Expiration Date	

Home Address (HOUSE #, STREET, CITY, STATE, ZIP) _____ Years at Residence _____

Home Address (HOUSE #, STREET, CITY, STATE, ZIP) _____ Years at Residence _____

Mailing Address (IF DIFFERENT FROM ABOVE) _____ Rent/Mortgage Payment _____

Mailing Address (IF DIFFERENT FROM ABOVE) _____ Rent/Mortgage Payment _____

Primary Phone CELL HOME Secondary Phone HOME WORK Other WORK

Primary Phone CELL HOME Secondary Phone HOME WORK Other WORK

E-Mail Address _____

E-Mail Address _____

Current Employer _____ Position/Occupation _____ Years There _____

Current Employer _____ Position/Occupation _____ Years There _____

Previous Employer (IF LESS THAN TWO YEARS AT CURRENT EMPLOYER) _____ Position/Occupation _____ Years There _____

Previous Employer (IF LESS THAN TWO YEARS AT CURRENT EMPLOYER) _____ Position/Occupation _____ Years There _____

Current Salary/Commission
\$ _____ per _____

Current Salary/Commission
\$ _____ per _____

Other Income (ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE NEED NOT BE REVEALED IF YOU DO NOT WISH IT CONSIDERED AS A BASIS FOR REPAYMENT FOR THE REVOLVING CREDIT LINE) | Source of Income
\$ _____ per _____

Other Income (ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE NEED NOT BE REVEALED IF YOU DO NOT WISH IT CONSIDERED AS A BASIS FOR REPAYMENT FOR THE REVOLVING CREDIT LINE) | Source of Income
\$ _____ per _____

D. Authorized Users (ADDITIONAL INDIVIDUALS WHOM THE ACCOUNT OWNERS AUTHORIZE TO USE THE CARD)

Last Name		First Name	
Middle Name	Social Security Number	Date of Birth	
ID Type	ID Number	ID Issued By	
ID Issue Date		ID Expiration Date	

Last Name		First Name	
Middle Name	Social Security Number	Date of Birth	
ID Type	ID Number	ID Issued By	
ID Issue Date		ID Expiration Date	

E. Important Information and Signature of Applicant/Co-Applicant

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. To process the application, we must have your name, street 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.

All information set forth in this application is declared to be a true representation of the facts, made for the purpose of obtaining the credit requested, and any willful misrepresentation on this application could result in criminal action.

I (we) authorize Bank of Guam® to make whatever credit inquiries that it deems necessary in connection with this credit application or in the course of review or collection of any credit extended in reliance on this application. I (we) authorize and instruct any person or consumer reporting agency to compile and furnish Bank of Guam® any information that it may have or obtain in response to such credit inquiries and agree that such information, along with this application, shall remain Bank of Guam®'s property whether or not credit is extended.

I (we) understand that I (we) will be (jointly and separately) liable for all charges on the account, and I (we) authorize Bank of Guam® to investigate any facts or obtain and exchange reports regarding this application, or resulting account with credit reporting agencies and others including affiliates of Bank of Guam®. I (we) will be informed of each agency's name and address.

Should my (our) application for the Bank of Guam® VISA® Gold not be approved, this constitutes my (our) application for the Bank of Guam® VISA® Classic.

Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____

CREDIT CARD DISCLOSURE

VISA® Credit Card Interest Rate & Interest Charges

Annual Percentage Rate (APR) for Purchases	VISA® Classic 16.00%	VISA® Gold 12.00%
APR for Cash Advances	VISA® Classic 16.00%	VISA® Gold 12.00%
APR for Balance Transfers	VISA® Classic 16.00%	VISA® Gold 12.00%
Minimum Interest Charge	If you are charged for interest, the charge will be no less than \$0.50.	
How to Avoid Paying Interest on Purchases	Your due date is at least 21 days after the close of each billing cycle. We will not charge you any interest on purchases if you pay your entire new balance by the due date of each month. We will begin charging interest on cash advances and balance transfers on the transaction date.	
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 website of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore .	
Fees		
Annual Fee	VISA® Classic: \$35.00	VISA® Gold: \$60.00
Additional Cardholder	VISA® Classic: \$15.00 annually (if applicable)	VISA® Gold: \$25.00 annually (if applicable)
Transaction Fees • Over-the-Counter Cash Advance • Automated Teller Machine (ATM) Cash Advance • Balance Transfer Fee • Foreign Transaction Fee	5% of Cash Amount, \$10.00 Minimum \$5.00 - NOTE: When you use an ATM not owned by us, you may be charged an additional fee by the ATM operator. 5% of Balance Transfer Amount, \$30.00 Minimum \$0	
Penalty Fees • Return Payment Fee	We will charge your account for each payment that is not honored for any reason. The charge will be the lesser of \$25.00 or the required Total Payment Due that appears on your most recent account statement.	

How We Calculate Your Daily Balance - We use a method called "average daily balance (including new purchases)".

Billing Rights: Information on your rights to dispute transactions and how to exercise those rights is provided in your Credit Card Cardholder Agreement & Disclosure Statement.

CREDIT DISCLOSURE: Bank of Guam®, as a condition of granting you a credit line, cannot require that you purchase an insurance product or annuity from the Bank or any of its affiliates. The Bank, as a condition of granting you a credit line, also cannot require your agreement not to obtain or prohibit you from obtaining an insurance product from an unaffiliated entity.

INSURANCE DISCLOSURE: Insurance products offered by Bank of Guam® are (1) not insured by the Federal Deposit Insurance Corporation, any government agency, or any other deposit insurance program; (2) not deposits with, obligations of, or guaranteed by Bank of Guam®; and (3) there is an investment risk associated with the product, including possible loss of value.

Important information about the Bank of Guam® Visa® Cash Back Reward Program

1.5% CASH BACK REWARD PROGRAM PROVISIONS

- The cash back reward will be paid monthly. There is a minimum cash back reward of \$5.00 each billing cycle which is the equivalent of \$333.00 of net purchases each billing cycle.
- The cash back reward earning period starts with the January billing cycle of the current year and ends with the December billing cycle of that same year. The maximum cash back reward is \$1,200.00 per cash back reward earning period.
- The cash back reward will appear as a credit on the account statement. The cash back reward cannot be exchanged for cash. The cardholder is responsible for any outstanding balance owed on the Account after the credit is applied. Cash back reward(s) cannot be applied toward the payment amount owed on an Account.
- Cash back reward accrual shall begin upon activation of the card and the first eligible purchase.
- Cash back reward will not be earned or accumulated for cash advances, convenience checks, traveler's check purchases, balance transfers, ATM/PIN transactions, interest charges, late fees, annual fees, over-limit fees, any transaction fees and returned check (payment) fees.
- The cash back reward cannot be bought, sold or transferred in any way (including upon death or as part of a domestic relations matter).
- To receive the cash back reward, the account must be open (meaning not in dispute, voluntarily closed, canceled or terminated for any reason); current (meaning there are no past-due balances on the account during qualifying period); account's outstanding balance must not be over the credit limit; account must not have a revoked, charged-off or bankruptcy status; and the account cannot have any other status preventing authorizations.
- Bank of Guam® and the administrator of the Program shall have no liability for disagreements between cardholders regarding cash back rewards. Discrepancies about cash back reward earnings are not treated as card billing disputes. Our decisions regarding cash back rewards shall be final.
- Cash back reward amount cannot be offset against the cardholder's obligation to the Bank.
- Bank of Guam® reserves the right to disqualify any cardholder from participation in the Program and invalidate all rewards for abuse, fraud, or any violation of the Program terms and conditions. Bank of Guam® may make such a determination in its sole discretion.
- Please consult your tax advisor concerning any income or other tax consequences that may be related to the Program. Liability for any applicable federal, state, or local tax arising out of the accumulation of cash back shall be your sole responsibility.
- The Program is void where prohibited by federal, state, or local law.
- Bank of Guam® reserves the right to change the terms and conditions of the Program. Cash back rewards may be restricted, limited, or cancelled.
- In no event shall the Bank be liable or responsible for, and you release us from, all claims in respect to any loss or damage suffered in connection with the Cash Back Reward Program by you or others that is caused by the aforementioned provisions above or any other activity regarding your participation in the Program.

The information about the cost of the card described in this application is accurate as of February 2018. This information may have changed after that month and date. For more information on any changes, please call us at (671) 472-5300 or write to: Bank of Guam® • Attn: Card Services • PO Box 57-C • Hagåtña, GU 96932.

AutoPay Authorization Form

Cardholder Agreement

I would like to participate in the AutoPay Program. I authorize the Bank of Guam® to automatically deduct the monthly payment from my deposit account as provided below:

Checking: _____

Savings: _____

Financial Institution Name: _____

Financial Institution Routing No: _____

Please choose one of the following monthly payments:

FULL STATEMENT BALANCE: The last statement balance that appears on your most recent billing statement.

MINIMUM DUE: The minimum payment due that appears on your most recent billing statement.

- The Minimum Amount Due will be calculated as 3% of the New Balance, plus any unpaid interest charges and fees including any past due minimum payments. If the New Balance is \$15.00 or less, you agree to pay it in full. If you are over-limit, the Minimum Amount Due does not include the amount in excess of the established credit limit. It is your responsibility to pay these amounts. Failure to pay will result in default.
- The automatic payment amount will be reduced by all payments posted on or before this date.

SET DESIGNATED AMOUNT (WHOLE DOLLAR) OF \$ _____.

- This amount must satisfy the minimum payment percentage as disclosed. If the designated amount does not satisfy the calculated minimum due, then the system debits the calculated minimum due. If the designated amount exceeds the last statement balance, then the system deducts only the last statement balance.

Terms and Conditions

- a. Payment will post on the account's due date.
- b. Credit for automatic payments are posted 25 days (in few cases 27 days) after the account cycle date. The payment debit reaches the financial institution through Automated Clearing House (ACH) approximately two days later, at which time the payment amount is deducted from the checking or savings account.
- c. Payments can be rejected by the paying or receiving depository financial institution for insufficient funds, account closure or other valid reasons. If this happens, the payment will be reversed and return payment fees will be assessed as applicable.
- d. In the event that a payment is returned, the Bank reserves the right to cancel your participation in the AutoPay program.
- e. If you elect to choose FULL STATEMENT BALANCE, one-time payments are not available on the GoToMyCard.com website.
- f. Auto Pay overrides Pay Ahead and Skip Pay, the features do not work together.
- g. An account flagged for Auto Pay will not generate an automatic payment if the account is bankrupt, lost, stolen or charged off.
- h. You may also enroll in the AutoPay program on the GoToMyCard.com website using your checking account only.

I understand that any incomplete or incorrect information provided may delay or void my participation in the AutoPay program. I have the right to cancel this automatic payment arrangement through written notice to the financial institution or on the GoToMyCard.com website.

Signature _____

Date _____