

**All sections within this form are for those requesting a new account**

Thank you for your credit application. We are required to obtain written consent before we can process a credit request on applications where a legally responsible cardholder is younger than 21 or whose date of birth we do not have on file. We are also required to obtain information that demonstrates that you have the ability to repay your debt. In order to comply with current federal regulations, we find it necessary to obtain your current income and written consent. **Please complete the section(s) that best fit your credit application request.** All forms need to be completed and returned to the address provided within 30 days. You will receive a letter in the mail requesting this same information, please respond only once. Please note all fields marked (\*) are required.

**Section F**– Please complete this section if you are applying for a new unsecured Credit Card

**Section G**– Please also complete this section if you are applying for an unsecured Credit Card account and you are being asked to add a guarantor to your application

**Section H**– Please also complete this section if you are applying for an unsecured Credit Card account and you are being asked to add a co-applicant to your application

**Section F**

Primary Applicant Full Name\*: \_\_\_\_\_

Address\*: \_\_\_\_\_

City\*: \_\_\_\_\_ State\*: \_\_\_\_\_ Postal Code\*: \_\_\_\_\_

Application Reference Number: \_\_\_\_\_

Best Daytime Telephone Number: \_\_\_\_\_

SSN or other Govt ID\*: \_\_\_\_\_ Date of Birth\*: \_\_\_\_\_

Country of Citizenship\*: \_\_\_\_\_

(If other than U.S., please provide physical address in that country): \_\_\_\_\_

Do you have Dual Citizenship\*?    Y        N

If yes, Country of Dual Citizenship: \_\_\_\_\_

**Please complete all of the information below and return it to P.O. Box 981811, El Paso, TX 79998-9986. Missing information may cause a delay in processing your request.**

Alimony, child support, or separate maintenance income does not need to be revealed if you do not wish it to be considered as a basis for repayment.

Applicant annual income: \_\_\_\_\_ Source of income: \_\_\_\_\_

Applicant additional income: \_\_\_\_\_ Source of additional income: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Monthly Housing payment: \_\_\_\_\_ Rent ( ) Mortgage ( ) Own ( ) Other ( )

**By signing below, I understand and agree to the terms of the account and that I will be liable for all balances on the account.**

Applicant Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

**If you are applying with a cosigner (a guarantor or co-applicant), please have them complete the following section:**

Alimony, child support, or separate maintenance income does not need to be revealed if you do not wish it to be considered as a basis for repayment. Income can include any and all \*accessible income\*.

We may obtain your credit report, employment history and any other information in order to approve or decline this application, service your account, and manage our relationship with you. If you ask, we will tell you the name and address of any consumer reporting agency that provided such reports to us.

Cosigner annual income: \_\_\_\_\_ Source of income: \_\_\_\_\_

Cosigner additional income: \_\_\_\_\_ Source of additional income: \_\_\_\_\_

Cosigner date of birth: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Monthly Housing payment: \_\_\_\_\_ Rent ( ) Mortgage ( ) Own ( ) Other ( )

\*Accessible income is any form of income that you have access to, regardless of who in the household actually earns the income.

**The applicant has reviewed the terms of the account with me. I agree to its terms and understand that I will be jointly and severally liable for all balances on the account.**

**I understand that the account agreement and all other communications about this account is sent to the primary applicant; if I wish to see these I will ask the primary applicant for a copy of them.**

Cosigner Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

**Section G**

Primary Applicant Full Name: \_\_\_\_\_

Application Reference Number: \_\_\_\_\_

**Please mail all completed forms to P.O. Box 981811, El Paso, TX 79998-9986.**

As a reminder, a guarantor is someone who is over 21 years of age and has established good credit. A guarantor is financially responsible for the account and provides additional assurance that the account will be responsibly managed. Please note all fields marked (\*) are required.

We may obtain your credit report, employment history and any other information in order to approve or decline this application, service your account, and manage our relationship with you. If you ask, we will tell you the name and address of any consumer reporting agency that provided such reports to us.

Guarantor Name\*: \_\_\_\_\_ Social Security Number\*: \_\_\_\_\_

Current physical street address\*: \_\_\_\_\_

City\*: \_\_\_\_\_ State\*: \_\_\_\_\_ Postal Code\*: \_\_\_\_\_

Application Reference Number: \_\_\_\_\_

Best Daytime Telephone Number: \_\_\_\_\_

Date of Birth\*: \_\_\_\_\_

Country of Citizenship\*: \_\_\_\_\_

If other than U.S., please provide physical address in that country: \_\_\_\_\_

Do you have Dual Citizenship\*?    Y        N

If yes, Country of Dual Citizenship: \_\_\_\_\_

Email address: \_\_\_\_\_

**NOTICE TO GUARANTOR:**

You are being asked to guarantee this debt. Think carefully before you do. If the borrower doesn't pay the debt, you will have to. Be sure that you can afford to pay if you have to and that you want to accept this responsibility. You may have to pay up to the full amount of the debt if the borrower does not pay. You may also have to pay late fees or collection costs, which increase this amount.

The bank can collect this debt from you without trying to collect from the borrower. The bank can use the same collection methods permitted by applicable law against you that can be used against the borrower. If this debt is ever in default, the fact will become a part of your credit record.

This notice is not the contract that makes you liable for this debt. Please keep a copy of this information in a safe place.

**The applicant has reviewed the terms of the account with me. I agree to its terms and understand that I will be jointly and severally liable for all balances on the account.**

**I understand that the account agreement and all other communications about this account is sent to the primary applicant; if I wish to see these I will ask the primary applicant for a copy of them.**

Guarantor Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

**Section H**

Primary Applicant Full Name: \_\_\_\_\_

Application Reference Number: \_\_\_\_\_

**Please mail all completed forms to P.O. Box 981811, El Paso, TX 79998-9986.**

As a reminder, a co-applicant is someone who is over 21 years of age and has established good credit. A co-applicant is jointly financially responsible for the account and the account will report as a joint account on the credit report of both applicants. Please note all fields marked (\*) are required to comply with the federal USA PATRIOT Act. We are required to obtain and verify several pieces of critical information: your legal name, social security number, date of birth, and physical street address.

We may obtain your credit report, employment history and any other information in order to approve or decline this application, service your account, and manage our relationship with you. If you ask, we will tell you the name and address of any consumer reporting agency that provided such reports to us.

Co-applicant Name\*: \_\_\_\_\_ Social Security Number\*: \_\_\_\_\_

Current physical street address\*: \_\_\_\_\_

City\*: \_\_\_\_\_ State\*: \_\_\_\_\_ Postal Code\*: \_\_\_\_\_

Application Reference Number: \_\_\_\_\_

Best Daytime Telephone Number: \_\_\_\_\_

Date of Birth\*: \_\_\_\_\_

Country of Citizenship\*: \_\_\_\_\_

If Country of Citizenship is other than U.S., please provide physical address in that country: \_\_\_\_\_

\_\_\_\_\_

Do you have Dual Citizenship\*?    Y        N

If yes, Country of Dual Citizenship: \_\_\_\_\_

Email address: \_\_\_\_\_

**NOTICE TO CO-APPLICANT:**

I agree to have my name added to the above-referenced application. I have read this entire application and everything I have stated is true. I am at least 21 years of age and either a United States citizen or a permanent resident of the United States. I authorize Bank of America to review my credit and employment histories and any other information in order to process this application, service my account, and manage its relationship with me. If I use the account, I do so subject to the terms of the Account Agreement as it may be amended or supplemented. I understand that by agreeing to be a joint applicant, I am liable for all balances, regardless of who makes each new transaction.

**The applicant has reviewed the terms of the account with me. I agree to its terms and understand that I will be jointly and severally liable for all balances on the account.**

**I understand that the account agreement and all other communications about this account is sent to the primary applicant; if I wish to see these I will ask the primary applicant for a copy of them.**

Co-applicant Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_