

CREDIT CARD APPLICATION (INDIVIDUAL)

Type of Credit Card (select one):

- MASTERCARD SECURED
 MASTERCARD UNSECURED

Type of Account (select one):

- INDIVIDUAL ACCOUNT
 JOINT ACCOUNT

Total Credit Line Requested

\$ _____

Please see Terms and Conditions attached hereto and which are hereby incorporated by reference, for rate, fee and other cost information. All terms, including fees and APRs for new transactions, may be subject to change.

Applicant / Primer Titular						
Last Name / Apellido		First Name / Nombre		Middle Name / Segundo Nombre		Social Security # / No. Seguro Social
Street Address / Dirección		City / Ciudad	State / Estado	ZIP Code / Código Postal	Date of Birth / Fecha de Nacimiento	Country of Citizenship / Ciudadanía
Housing Status (select one) / Tipo de Vivienda (seleccionar uno) <input type="checkbox"/> Own/Buying / Propia <input type="checkbox"/> Rent / Alquiler <input type="checkbox"/> Other / Otra Specify / Especificar:		Monthly Payment / Pago mensual		Mother's Maiden Name / Segundo Apellido		Email / Correo electrónico
Is your mailing address the same as your street address (If NO, please provide your mailing address below)? Mailing Address / Dirección para correspondencia		Years at Current Address / Tiempo en su dirección actual		Home Phone # / No. Teléfono residencia		Preferred Language / Idioma preferido
		<input type="checkbox"/> YES <input type="checkbox"/> NO		Mobile Phone # / No. Celular		Work Phone # / No. Teléfono oficina
		City / Ciudad		State / Estado	ZIP Code / Código Postal	
Employment Status / Actividad económica <input type="checkbox"/> Employed / Empleado <input type="checkbox"/> Retired / Pensionado <input type="checkbox"/> Self-Employed / Independiente <input type="checkbox"/> Student / Estudiante <input type="checkbox"/> Other / Otra			Company name or name of employer / Nombre de la Empresa			
			Position/Occupation / Cargo/Ocupación		Years with Employer / Tiempo en la Empresa	
Co-Applicant/Guarantor / Segundo Titular/Co-Deudor (Complete this section only if a Co-applicant is applying for a joint account or Guarantor is granting a security interest in a Collateral Account (as defined in the Security Agreement))						
Last Name / Apellido		First Name / Nombre		Middle Name / Segundo Nombre		Social Security # / No. Seguro Social
Street Address / Dirección		City / Ciudad	State / Estado	ZIP Code / Código Postal	Date of Birth / Fecha de Nacimiento	Country of Citizenship / Ciudadanía
Housing Status (select one) / Tipo de Vivienda (seleccionar uno) <input type="checkbox"/> Own/Buying / Propia <input type="checkbox"/> Rent / Alquiler <input type="checkbox"/> Other / Otra Specify / Especificar:		Monthly Payment / Pago mensual		Mother's Maiden Name / Segundo Apellido		Email / Correo electrónico
Is your mailing address the same as your street address (If NO, please provide your mailing address below)? Mailing Address / Dirección para correspondencia		Years at Current Address / Tiempo en su dirección actual		Home Phone # / No. Teléfono residencia		Preferred Language / Idioma preferido
		<input type="checkbox"/> YES <input type="checkbox"/> NO		Mobile Phone # / No. Celular		Work Phone # / No. Teléfono oficina
		City / Ciudad		State / Estado	ZIP Code / Código Postal	
Employment Status / Actividad económica <input type="checkbox"/> Employed / Empleado <input type="checkbox"/> Retired / Pensionado <input type="checkbox"/> Self-Employed / Independiente <input type="checkbox"/> Student / Estudiante <input type="checkbox"/> Other / Otra			Company name or name of employer / Nombre de la Empresa			
			Position/Occupation / Cargo/Ocupación		Years with Employer / Tiempo en la Empresa	
Income Information / Informacion Financiera						
Federal Law requires that we collect financial information to determine your ability to pay. If you do not have income, we may request a guarantor. Income from alimony, child support, or separate maintenance payment need not be revealed if you do not wish us to consider it as a basis for repayment. Due to the requirements in the Credit CARD Act of 2009, your maximum credit line amount will be based on your individual ability to pay - which is determined by the income you provided.						
Annual Income / Ingreso anual	Other Earnings / Otros ingresos	Total Earnings / Total ingresos	Co-Applicant/Guarantor Segundo titular/Co-deudor Annual Income / Ingreso anual	Co-Applicant/Guarantor Segundo titular/Co-deudor Other Earnings / Otros ingresos	Co-Applicant/Guarantor Segundo titular/Co-deudor Total Earnings / Total ingresos	
Annual Financial Expense (Credit Cards; Auto & other loans) / Gastos anuales (tarjeta de crédito y otras obligaciones)			Co-Applicant/Guarantor / Segundo titular/Co-deudor Annual Financial Expense (Credit Cards; Auto & other loans) / Gastos anuales (Tarjeta de crédito, y otras obligaciones)			
Total Financial Expense / Total gastos anuales			Co-Applicant/Guarantor / Segundo titular/Co-deudor Total Financial Expense / Total gastos anuales			



Additional Services/Collateral Accounts (select all that apply)

AUTOMATIC DEBIT AUTHORIZATION. I hereby elect Automatic Debit Services and have delivered Automatic Debit Instructions ("Debit Instructions") to Banco Davivienda S.A., International Bank Branch (hereinafter, "Bank", "we" or "us") concurrently with this application. Pursuant to the Debit Instructions, I authorize the Bank to, on each Payment Due Date, debit the account I have designated and maintain with the Bank (the "Designated Account") in accordance with the Debit Instructions. I understand that it is my responsibility to make sure that there are sufficient available funds in the Designated Account on each Payment Due Date to cover the amount of the New Balance Total or the Total Minimum Payment Due, as the case may be; however, the debits will be made in accordance with the Debit Instructions irrespective of the amount of available funds in the Designated Account, even if the effect of a debit will be to create or increase an overdraft in the Designated Account. I agree that in paying any amounts from the Designated Account, the Bank shall not be responsible for determining the accuracy, validity or propriety of any charges shown on any account bill and I assume all responsibility for any errors or problems that may appear on such bill because of this bill payment authorization, including for any checks or funds transfers that remain unpaid as a result of an overdraft in the Designated Account.

ACCOUNT STATEMENTS. (See Paragraph 22 Account agreement for applicable provisions)

E-Statement authorization

TIME DEPOSIT ACCOUNT. I hereby grant a security interest in the Time Deposit Account described below in favor of the Bank which will secure the approved credit line in accordance with the terms of the Security Agreement with the Bank.

Account No. _____ Balance _____

Your Relationships with Our Affiliates

In evaluating your application and determining what rates and services we may offer you, we may consider your relationship with us and/or our affiliates, whether you have other accounts with us and/or our affiliates, your balances with us in your other accounts, your prior credit history with us and/or our affiliates and how you use services that we offer with your accounts.

Are you an existing customer of Banco Davivienda S.A. or one of its affiliates?

YES NO

If YES, please select one and complete the requested information.

Banco Davivienda S.A. Country: _____

Other: _____ Country: _____

PLEASE READ CAREFULLY BEFORE SIGNING: By submitting this application, you: (1) acknowledge that you have reviewed the Terms and Conditions; (2) agree to submit your application for this credit card subject to the Credit Card Agreement and Disclosure Statement (the "Credit Card Agreement"); and (3) authorize us to use the information in your application, and any other information we or our affiliates have about you, to determine your ability to pay, as required by Federal law.

You have read the accompanying application, and you affirm that everything you have stated is true and complete. You are at least 18 years of age. You authorize us to obtain your credit report(s), employment history and any other information in order to approve or decline this application, service your account, and manage our relationship with you. You consent to our sharing of information about you and your account with the organization, if any, endorsing this credit card program. You authorize us to share with others, to the extent permitted by law, such information and our credit experience with you. In addition, you may as a customer later indicate a preference to exempt your account from some of the information-sharing with other companies ("opt-out"). If you accept or use an account, you do so subject to the terms of this application, the Terms and Conditions and the Credit Card Agreement, as amended from time to time; you also agree to pay all charges incurred under such terms. Any changes you make to the terms of this application will have no effect. You understand that only a portion of your Total Credit Line will be available for Bank Cash Advances. You accept that on a periodic basis your account may be considered for automatic upgrade at our discretion. You consent to and authorize us, any of our affiliates, or our marketing associates to monitor and/or record any of your phone conversations with any of our representatives.

USA PATRIOT Act: 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. 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.

In addition to the terms and conditions noted above, by signing and/or submitting the application, you agree that:

1. You accept this offer from us for the credit card account selected above with the understanding that if such account is a secured account, the amount deposited by you (subject to any minimum required by us) in a new Time Deposit Account will be used as collateral to secure the obligations to us that you incur from time to time in connection with your Credit Card account. You agree to be bound by the terms and conditions of the Security Agreement.
2. If applicable, the Time Deposit Account that you are opening with us is subject to the terms of the Credit Card Agreement and the Security Agreement.
3. Your signature(s) or other authentication specified by the Bank will serve as verification for any transaction in connection with the Time Deposit Account.
4. You will receive a Credit Card Agreement with your card(s). The Credit Card Agreement becomes effective and you agree to its terms by either using your Credit Card account or by not closing your Credit Card account within three days of receipt of your Credit Card Agreement.

X _____
Applicant Signature Date

X _____
Co-Applicant/Guarantor Signature Date

FOR INTERNAL USE ONLY

MasterCard® Account No.	<input type="checkbox"/> Approved <input type="checkbox"/> Declined	Time Deposit Account No. (if applicable)
Date Approved/Declined	Total Credit Line	Approved By

Davivienda International does business in accordance with Federal Fair Lending Laws.



TERMS AND CONDITIONS OF YOUR MASTERCARD

Details of Rate, Fee and Other Cost Information

As required by law, rates, fees and other costs of this credit card offer are disclosed here. All account terms are governed by the Credit Card Agreement. Account and agreement terms are not guaranteed for any period of time; all terms, including fees and the APRs for new transactions, may change in accordance with the Credit Card Agreement and applicable law. We may change them based on information in your credit report, market conditions, business strategies, or for any reason. You should thoroughly review all the materials in this package so that you are fully informed about your credit card loan.

INTEREST RATES AND INTEREST CHARGES	
Annual Percentage Rate (APR) for Purchases	15% APR. This APR will not vary with the market based on the prime rate.
APR for Balance Transfers	16% APR. This APR will not vary with the market based on the prime rate.
APR for Cash Advances	16% APR for Cash Advances. This APR will not vary with the market based on the prime rate.
Penalty APR and When it Applies	Up to 18% , based on your creditworthiness. This APR will not vary with the market based on the prime rate. This APR may be applied to new transactions on your account if you make a late payment. How Long Will the Penalty APR Apply? If you APRs are increased, the Penalty APR will apply indefinitely.
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 balance by the due date each month.
Minimum Interest Charge	There will be no minimum interest charge. Interest will be based on the outstanding balance.
For Credit Card Tips from the Federal Reserve Board	To learn more about factors to consider when applying for or using a credit card, visit the website of the Federal Reserve Board at: http://www.federalreserve.gov/creditcard .
FEES	
Annual Fee	\$60.00 will be charged on the first anniversary date and every year after that.
Transaction Fees <ul style="list-style-type: none">• Purchases• Balance Transfers• Cash Advances• Foreign Transactions	None Either \$10.00 or 3% of the amount of each transaction, whichever is greater. Either \$10.00 or 3% of the amount of each transaction, whichever is greater. 3% of the U.S. Dollar amount of each transaction made in a foreign currency or made in U.S. Dollars that is processed outside the United States. This fee will be in addition to any other applicable fee.
Penalty Fees <ul style="list-style-type: none">• Late Payment• Returned Payment	\$25.00 if the monthly minimum balance is less than \$25.00 otherwise is \$35.00 Up to \$30.00
HOW WE WILL CALCULATE YOUR BALANCE	
For Purchase balances, we will use a method called "average daily balance (including new purchases)."	
For Balance Transfer and Cash Advance balances, we will use an Average Balance Method (including new Balance Transfers and Cash Advances): This balance is figured by adding the outstanding balance (including new Balance Transfers and Cash Advances) and deducting payments and credits for each day in the current billing cycle, together with the balances for each day in the previous billing cycle for balance transfers and cash advances with transaction dates in the previous cycle and posting dates in the current cycle, and then dividing by the number of days in the current billing cycle.	

The information in this application was accurate as of July 1st, 2013 and may have changed.

The Banco Davivienda S.A., International Bank Branch Privacy Notice is available at www.daviviendaintl.com and accompanies the credit card.

This credit card program is issued and administered by **Banco Davivienda S.A., International Bank Branch**. Any account opened in response to this application shall be governed by the laws of the State of Florida. **Master Card** is a registered trademark of **Master Card International Incorporated**, and is used by the issuer pursuant to license from Master Card Platinum Program.

Davivienda International does business in accordance with Federal Fair Lending Laws.

