

CREDIT APPLICATION

Please print clearly. Complete all required blocks and sign the application.

Applicant's Name (First, Middle, Last)			Social Security #		Date of Birth	
Street Address (no P.O. boxes)			City		State	ZIP Code
Applicant <input type="checkbox"/> Rents <input type="checkbox"/> Owns	Rent or Mortgage Payment \$	If Applicant owns or is buying: Home Value: \$		Mortgage Balance: \$		Time at Address yrs mos ()
Mailing Address (if different from Street Address)			City		State	ZIP Code
Employer		Position		How Long yrs mos	Work Phone ()	Salary \$ Per
Other Income: Income from alimony, child support, or separate maintenance payments need not be disclosed if you do not wish to have it considered as a basis for repaying this obligation. \$ Per Source:						
Nearest Relative Not Living With You (Relationship, Name, Address, City, State, ZIP Code, Phone)						

Complete Co-Applicant information if you are applying for joint credit.

Co-Applicant's Name (First, Middle, Last)			Social Security #		Date of Birth	
Street Address (Check if same as Applicant <input type="checkbox"/> (no P.O. boxes)			City		State	ZIP Code
Mailing Address (if different from Street Address)			City		State	ZIP Code
Co-Applicant's Employer		Position		How Long yrs mos	Work Phone ()	Salary \$ Per

Notices to Applicant and Co-Applicant: 1. This application will be submitted for consideration to CitiFinancial Retail Services Division of Citicorp Trust Bank, fsb, a federal savings bank (the "Bank"), whose mailing address is PO Box 22060, Tempe, AZ 85285-2060. 2. You authorize the Bank to gather information about you it considers necessary or desirable (including obtaining your consumer report from consumer reporting agencies and gathering information from employers, your banks and other sources) in evaluating this application, and if this application is approved, thereafter for purposes of updates, renewals, extensions of credit, reviews and collection of your Account. If you ask the Bank, the Bank will tell you whether or not the Bank requested a consumer report for you and the names and addresses of any consumer reporting agencies that provided it such reports. 3. If this application is not approved by the Bank, you authorize the Bank and the merchant to furnish all of your application information to other possible financing sources for credit programs such other sources may offer, and you authorize such other sources to make inquires about you they consider necessary or desirable (including obtaining your consumer report from consumer reporting agencies) in evaluating you for credit. **4. If this application is approved by the Bank, you agree to all of the terms and conditions of the attached agreement (Form 23462-BB Brand Direct App/Agmt 22.99% (09/06)) (the "Agreement"), which are incorporated herein by reference.** 5. Do not sign this application before you read the Agreement. You acknowledge receipt of the Agreement before making any purchases under the Agreement. 6. Paragraph 22 of the Agreement provides that you grant the Bank a security interest in goods for certain purchases made with your Account. **7. Paragraph 27 of the Agreement contains provisions requiring arbitration of various claims and controversies.** 8. Any married person may apply for a separate account. 9. If this application is signed by the Applicant and Co-Applicant, you acknowledge that you are applying to the Bank for joint credit and that if this application is approved by the Bank, each of you will be liable under the Agreement for all credit extended under the Agreement to either or both of you.

BUYER'S RIGHT TO CANCEL: IF THIS BOX IS CHECKED, YOU, THE BUYER, MAY CANCEL THIS TRANSACTION AT ANY TIME PRIOR TO MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE OF THIS TRANSACTION. SEE THE SEPARATE NOTICE OF CANCELLATION FORM FOR AN EXPLANATION OF THIS RIGHT.

<input checked="" type="checkbox"/> Signature of Applicant _____ Date _____	<input checked="" type="checkbox"/> Signature of Co-Applicant _____ Date _____
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MERCHANT'S USE ONLY

Merchant	Store # or Location			Salesperson #
Estimated Purchase Amount \$	Account #		Approved Credit Limit \$	
Applicant's 1st I.D. Type & Number	Issuing State or Other Issuing Authority	Exp. Date	Applicant's 2nd I.D. Type or Issuer (Do not list number)	Exp. Date
Co-Applicant's 1st I.D. Type & Number	Issuing State or Other Issuing Authority	Exp. Date	Co-Applicant's 2nd I.D. Type or Issuer (Do not list number)	Exp. Date



**IMPORTANT INFORMATION ABOUT OPENING A NEW ACCOUNT AT
CITIFINANCIAL RETAIL SERVICES DIVISION OF CITICORP TRUST BANK, FSB**

To help the United States Government fight terrorism and money laundering, Federal law requires us to obtain, verify, and record information that identifies each person that opens an account. What this means for you: when you open an account, we will ask for your name, a street address, date of birth, and an identification number, such as a Social Security number, that Federal law requires us to obtain. We may also ask to see your driver's license or other identifying documents that will allow us to identify you. We appreciate your cooperation.

REVOLVING CREDIT AGREEMENT AND DISCLOSURE STATEMENT

This is your Agreement with CitiFinancial Retail Services Division of Citicorp Trust Bank, fsb, a federal savings bank located in Delaware. Please read this Agreement and keep it for your records.

Annual percentage rate (APR) for purchases	22.99%
Other APRs	Default Rate APR: 26.99%. See explanation below*
Grace period for repayment of balances for purchases	None
Method of computing the balance for purchases	Average Daily Balance (including new purchases)
Annual fees	None
Minimum finance charge	\$1.50
Late payment fee:	\$15 if Account balance is \$99.99 or less; \$29 if Account balance is \$100.00 to \$249.99; and \$39 if Account balance is \$250.00 or more
Returned payment fee:	\$39 (charged once per instrument or debit not honored or not paid)