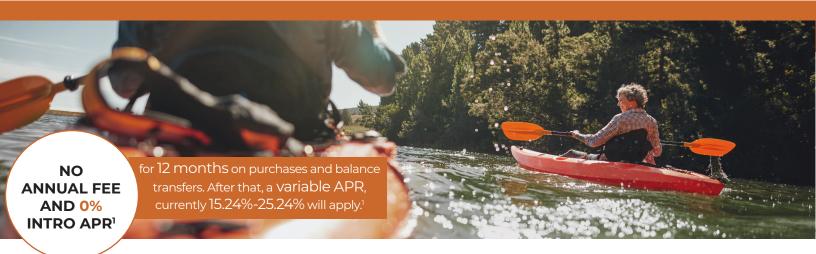
# **Our Rewards Platinum** Visa® credit card

with hometown convenience, worldwide acceptance, and great benefits.





#### **Reward Points**

#### Get rewarded with points

- Earn one point per dollar on net purchases. No cap on points vou can earn.2
- Redeem points for merchandise, rental cars, cruises, hotels and airline travel.
- Airline tickets good on any airline with no blackout dates.
- Visit cRewards® at cRewardsCard.com for details.



### 24/7 Personal **Customer Service**

- Call the Customer Contact Center 24/7. Representatives are located in the U.S. and are dedicated to providing you with personal service, the kind you receive when you come into our branch.
- Stop by our branch for a little extra help.
- Manage your account online and go paperless.



### **Card Security**

Your Rewards Platinum Card has multiple layers of cardholder protection so you can feel confident when you use it.

- Zero Fraud Liability
- Fraud Monitoring
- Text and Email Fraud Alerts
- ID Navigator Powered by NortonLifeLock<sup>3</sup>



#### **Travel Benefits** & More

- ▶ Travel Accident Insurance⁴
- ▶ Cell Phone Protection<sup>5</sup>
- Purchase & Extended Protection
- Travel & Emergency Assistance
- For more information visit CardBenefitServices.com or call 1-866-894-8569.

1.

Please print ALL PAGES of this document. Once completed, please sign and mail the application.

**NEW ACCOUNTS CENTER** P.O. BOX 105666 ATLANTA, GA 30348-5666



You can use the provided pre-paid Business Reply Envelope. Follow the supplied directions to prevent papers from separating during transit. Remember to tape envelope closed.



Applicant should keep the Important disclosures for the terms, rates or fees associated with this program.



### HOMETOWN CONVENIENCE | WORLDWIDE ACCEPTANCE | GREAT BENEFITS

- <sup>1</sup> See Important Disclosures. Subject to credit approval. This card is issued by TCM Bank, N.A. <sup>2</sup> In order to access rewards, your account must be open and in good standing.
- 3 No one can prevent all identity theft. <sup>4</sup> Coverage applies when the entire cost of the fare (less redeemable certificates, vouchers,
- or coupons) has been charged to the card. Your account must be in good standing. Restrictions to coverage may apply.
- <sup>5</sup> Certain terms, conditions and exclusions apply. In order for the coverage to apply, you must charge your eligible cellular wireless bill to your covered TCM Bank-issued card. To learn more about this benefit or to file a claim visit the FAQ section at www.cardbenefitservices.com or call 1-866-894-8569.

Date

### Bridge Community Bank

terms.

Applicant Signature

#### Please fill out the application electronically or by hand.

Please see important **terms, rates, and fees** in the **Important Disclosures**. In accordance with federal law, all financial institutions are required to obtain, verify, and record information that identifies each person who opens an account.

|                                                                                                                                                                                    |                       |                    |                                   |                          |                    |                                       |               |           |                  |                 |         |         | Initio  | 112                 |    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|--------------------|-----------------------------------|--------------------------|--------------------|---------------------------------------|---------------|-----------|------------------|-----------------|---------|---------|---------|---------------------|----|
| st Name                                                                                                                                                                            |                       |                    | Middle                            | Initial                  |                    |                                       | Last 1        | Name      |                  |                 |         |         |         |                     |    |
| urrent Street Address                                                                                                                                                              | Apt/Unit Numl         | ber                |                                   | City                     |                    |                                       |               | Sta       | te               | Zip Cc          | de      |         | Numb    | oer of Y            | ec |
| ailing Address (If different from current address)                                                                                                                                 | Apt/Unit Numl         | ber                |                                   | City                     |                    |                                       |               |           |                  | S               | tate    |         | Zip C   | Code                | _  |
| me Phone                                                                                                                                                                           | Cell Phon             | ne                 |                                   |                          |                    |                                       |               | W         | ork Pl           | none            |         |         |         | □Re                 |    |
| cial Security Number                                                                                                                                                               | Date of Birth         |                    | \$<br>Gros                        | ss Monthly Ir            | ncome              | ,6                                    |               |           | Моі              | \$<br>nthly Ho  | using P | ayment  | (if non | e, put \$           |    |
| nployer                                                                                                                                                                            |                       | Occup              | ccupation/Title Nu                |                          |                    |                                       |               | Nur       | nber of          | Years           |         |         | _       |                     |    |
| nail Address                                                                                                                                                                       |                       |                    | Mother                            | 's Maiden                | Name               | (For S                                | Security      | Purposes  | Only             |                 |         |         |         |                     |    |
| alue of your financial assets (retirement accounts                                                                                                                                 |                       | □ \$0 -<br>□ \$5,0 |                                   | □ \$10,000<br>□ \$25,000 |                    |                                       |               |           |                  |                 | More t  | nan \$2 | 50,000  |                     |    |
| CO-APPLICANT You MUST                                                                                                                                                              | T initial here if yo  | ou are             | e applyin                         | g with ar                | n App              | olica                                 | nt. I         | ntenc     | l to a           | apply           | for joi | nt cre  | dit     | Initials            |    |
| st Name                                                                                                                                                                            |                       |                    | Middle                            | Initial                  |                    |                                       | Last N        | lame      |                  |                 |         |         |         | ITIIIIQIS           | _  |
| urrent Street Address                                                                                                                                                              | Apt/Unit Numb         | her                |                                   | City                     |                    |                                       |               | Sto       | ate              | 7in (           | Code    |         | Numh    | per of Ye           |    |
|                                                                                                                                                                                    |                       |                    |                                   |                          |                    |                                       |               |           |                  | ·               |         |         |         |                     | _  |
| ailing Address (If different from current address)                                                                                                                                 | Apt/Unit Numb         | oer                |                                   | City                     |                    |                                       |               |           |                  | S               | tate    |         | Zip C   | ode                 |    |
| me Phone                                                                                                                                                                           | Cell Phon             | ne                 | \$                                |                          |                    |                                       |               | Wo        | ork Ph           | none<br>\$      |         |         |         |                     |    |
| cial Security Number                                                                                                                                                               | Date of Birth         |                    | Gross Monthly Income <sup>6</sup> |                          |                    | Monthly Housing Payment (if none, put |               |           |                  |                 | ne, put | \$(     |         |                     |    |
| nployer                                                                                                                                                                            | (                     | Occup              | ation/Title                       |                          |                    |                                       |               |           |                  | Nun             | nber of | Years   |         |                     | _  |
| elationship to Applicant                                                                                                                                                           |                       |                    | E-mail /                          | Address                  |                    |                                       |               |           |                  |                 |         |         |         |                     | _  |
| alue of your financial assets (retirement account imony, child support, or separate maintenance in                                                                                 | ncome need not be     | ) <b>□</b> \$5,0   |                                   | •                        | 00 - \$49<br>to be | 9,999<br>consi                        | □\$1<br>dered | 00,000 -  | \$249<br>sis for | ,999<br>repayii |         | bligati |         |                     |    |
| (Not financially responsible for charges ma                                                                                                                                        | de on the account.    | )                  | Accou                             | nt Number                |                    |                                       |               |           |                  |                 | ame o   |         | tor     |                     |    |
| ame Relati                                                                                                                                                                         | onship to Applicant   | -                  |                                   |                          |                    |                                       |               |           |                  |                 |         |         |         |                     |    |
| ocial Security Number                                                                                                                                                              | Date of Birth         |                    | Payme                             | nt Address               |                    |                                       |               |           | City             |                 |         | Sto     | ate     | Zip                 |    |
|                                                                                                                                                                                    |                       |                    | Amoun                             | t of Transfe             | r                  |                                       |               |           |                  |                 |         |         |         |                     | _  |
| portant disclosures about the Military Lending Ac                                                                                                                                  | t will be provided wi | ith vou            |                                   |                          |                    |                                       |               |           |                  |                 |         |         |         |                     |    |
| rd. if you would like information now, please con                                                                                                                                  |                       | ,                  |                                   | 75 CP1 51                | 0 (                | 0923                                  | - SC3         | 01        |                  |                 | CSRID   |         |         |                     |    |
| n order for us to confirm identity for applicants with<br>provide a copy of your <u>social security card</u> and a<br><u>picture ID</u> via the address located on the front of th | valid government iss  |                    | ## KIF                            |                          |                    |                                       |               |           |                  |                 |         |         |         |                     | =  |
| applicants must sign. Please read the following information I/We supplied is accurate and compormation regarding the account may be reported.                                      | lete, (c) I/We agree  | that ind           | quiries may                       | be made to               | o verify           | / infor                               | matior        | n, a cred | ud tik           | reau rej        | oort mo | y be ol | otained | d, and to<br>hone n | hc |

### **IMPORTANT DISCLOSURES**

Information on this disclosure was accurate as of 05/04/2024

This card will be issued and administered by TCM Bank, N.A. Before you submit your application, please read through these Important Disclosures, which contain additional information about rates, fees, and other costs, as applicable. The variable rates, the fees, and the terms are subject to change. To find out if any rates, fees or terms have changed, please write to: TCM Bank, N.A., P.O. Box 105666, Atlanta, GA 30348. Each applicant must be at least 18 years of age.

#### **Interest Rates and Interest Charges:**

| Annual Percentage Rate<br>(APR) for Purchases                            | 0% Introductory APR applies for twelve billing cycles from date of account opening. After that, your APR will be $15.24%$ to $25.24%$ based on your creditworthiness. This APR will vary with the market based on Prime Rate.*                             |  |  |  |  |  |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| APR for Balance Transfers                                                | <b>0%</b> Introductory APR applies for twelve billing cycles from date of account opening.  After that, the standard APR will be <b>15.24%</b> to <b>25.24%</b> , based on your creditworthiness. This APR will vary with the market based on Prime Rate.* |  |  |  |  |  |
| APR for Cash Advances                                                    | 27.24%. This APR will vary with the market based on Prime Rate.*                                                                                                                                                                                           |  |  |  |  |  |
| How to Avoid<br>Paying Interest on Purchases                             | Your due date is at least 23 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                                                  | If you are charged interest, the charge will be no less than \$1.00.                                                                                                                                                                                       |  |  |  |  |  |
| For Credit Card Tips from the<br>Consumer Financial Protection<br>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                            | None                                                                                                                                                                                          |
|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Transaction Fees     Balance Transfer | Either \$5 or 3% of each balance transferred, whichever is greater.                                                                                                                           |
| Cash Advance                          | Either \$5 or 3% of each cash advance, whichever is greater.                                                                                                                                  |
| Foreign Transaction                   | 1% of the U.S. dollar amount of each transaction made in a foreign currency, in U.S. dollars outside the U.S., or (whether in a foreign currency or in U.S. dollars) with a foreign merchant. |
| Penalty Fees                          |                                                                                                                                                                                               |
| <ul> <li>Late Payment</li> </ul>      | Up to <b>\$40.</b>                                                                                                                                                                            |
| Over-the Credit<br>Limit              | None.                                                                                                                                                                                         |
| Returned Payment                      | Up to <b>\$40.</b>                                                                                                                                                                            |

**How We Will Calculate Your Balance:** We use a method called "Average Daily Balance (including new transactions)."

**Loss of the Introductory APR:** If you make a late payment, we may end your Introductory APR for Purchases and Balance Transfers and apply the Purchase and Balance Transfer APR which would apply when the Introductory APR expires.

**Loss of the Employee Rate:** If you are eligible for the Employee Rate Program, you will receive a 15.24% variable APR on purchases and balance transfers. In the event your current employment ends, we will apply the APR then in effect which would apply when the Introductory APR expires, based on your creditworthiness.

Billing Rights: Information on your rights to dispute transactions and how to exercise those rights will be provided in your Cardholder Agreement.

\*We add a margin to the Prime Rate to determine variable APRs. We use the highest Prime Rate listed in The Wall Street Journal on the last business day of the calendar month prior to your statement closing date ("Last Business Day") and apply it beginning with the first billing period following the Last Business Day. APRs shown here are based on a 8.50% Prime Rate. For each billing period, the APR may increase or decrease with the Prime Rate. The margin for the APR for Purchases and Balance Transfers is 6.74% to 16.74%, based on your creditworthiness and for Cash Advances is 18.74%.

NOTICE: A consumer credit report may be requested in connection with this application and subsequent consumer reports may be requested or utilized in connection with an update, renewal or extension of the credit for which application was made. Upon request, you will be informed whether or not a consumer report was requested, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. You agree that we will consider this an Application for a Visa® or Mastercard® account. You agree that we reserve the right, based upon our evaluation of information furnished by you or others, not to open an account.

## Important Information About Procedures for Opening a New Account

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 for 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.

State Laws Require the Following Notices: California Residents: A married applicant may apply for a separate account. After credit approval, each applicant shall have the right to use this account to the extent of any limit set by the creditor and each applicant may be liable for all amounts extended under this account to any joint applicant. Delaware Residents: Service charges not in excess of those permitted by law will be charged on the outstanding balances from month to month. New York Residents: New York residents may contact the New York state department of financial services by telephone or visit its website for free information on comparative credit card rates, fees and grace periods. New York state department of financial services telephone: (800) 342-3736 and website: www.dfs.ny.gov. Ohio Residents: The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio civil rights commission administers compliance with this law. Married Wisconsin Residents: Your signature confirms that this credit obligation is being incurred in the interest of your marriage or family. No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70, adversely affects the creditor's interest unless, prior to the time the credit is granted, the creditor is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision when the obligation to the creditor is incurred. If the credit card for which you are applying is granted, you will notify TCM Bank if you have a spouse who needs to review notification that credit has been extended to you.

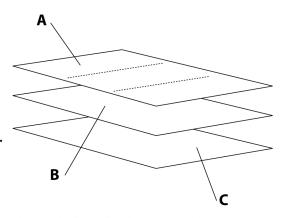
**Applicable Law**: The above rates and fees are governed, as are your Cardholder Agreement and account, by the applicable laws and regulations of the United States of America and to the extent not preempted by federal law, the laws and regulations of the State of Florida.

Balance Transfer Disclosures: You agree to allow approximately 30 days for us to process your application and, if approved, transfer the balance(s) to your TCM account. Please continue to make at least minimum payments on your other credit cards until they notify you that the balances have been transferred. If the amounts you request to be transferred do not satisfy the outstanding balance(s) on the designated accounts, you will continue to be responsible for those balances. The total amount of your credit line. You may not transfer balances from other accounts issued by TCM Bank. Transfer requests to cash or to yourself cannot be processed. The payment and transfer of balances are contingent upon approval by the bank and receipt of complete, legible balance transfer requests.

**Rewards:** In order to access reward points, your account must be open and in good standing.

- DO NOT use excessive amounts of tape when closing the envelope, as it might delay the processing of your application.
- DO NOT use industrial tape to close envelope, only use office tape.

STEP 1: FOLD THIS PANEL DOWN (INSIDE)



- A. Business Reply Envelope (Created Once Folded)
- **B.** Blank Sheet of Paper (Aide the Privacy of your Information)
- C. Your Completed Application

**393H 39AT** TAPE HERE

В



TAPE HERE TAPE HERE

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES



POSTAGE WILL BE PAID BY ADDRESSEE

TCM BANK PO BOX 105666 ATLANTA GA 30348-9730



ԱլիլՈդեսի Ռեսիլիից ||ԱլոլիՈրիցը Ուրսիլիեից Ույի

STEP 3: TAPE TOP CLOSED WHERE IT SAYS "TAPE HERE" (DO NOT USE INDUSTRIAL TAPE)

STEP 4: TAPE ON BOTH ENDS (DO NOT USE INDUSTRIAL TAPE)

STEP 5: DO NOT STAPLE CLOSED