

# IBERIABANK SELECT

## VISA CREDIT CARD APPLICATION

I/We intend to apply for  individual credit or  joint credit (Please initial only one).

### 1. APPLICANT INFORMATION

(PLEASE PRINT OR TYPE ALL INFORMATION. AN INCOMPLETE APPLICATION WILL NOT BE PROCESSED.)

Last Name	First	Middle	Social Security Number	Date of Birth							
					/	/					
Home Address (Actual Street Address, cannot be P.O. Box, business address, or alternate address)					Apt #	City	State	Zip Code			
<input type="checkbox"/> Own	<input type="checkbox"/> Live w/Parents	How Long?	Mo. Rent/Payment	Home Phone	*U.S. Citizen	Mother's Maiden Name or Security Password					
<input type="checkbox"/> Rent	<input type="checkbox"/> Other	<input type="checkbox"/> Own Free & Clear	____ yrs. ____ mos.	( )	Yes <input type="checkbox"/> No <input type="checkbox"/>						
Mailing Address (if different from home. This is where we will send your card and statements, PO Boxes Only)					Apt#	City	State	Zip Code			
Previous Home Address (if above is less than 1 year)					City	State	Zip Code	<input type="checkbox"/> Own	<input type="checkbox"/> Live w/Parents	How Long?	
					<input type="checkbox"/> Rent	<input type="checkbox"/> Other	<input type="checkbox"/> Own Free & Clear	____ yrs. ____ mos.			
E-mail Address					Drivers License Number		State Issued	DL Issue Date	DL Expiration Date		
Present Employer					Business Phone		Employer Verification Phone No.		How Long?		
					( )		( )		____ yrs. ____ mos.		
Employer's Address					Kind of Business		Position/Occupation		Income		How Long?
									\$		____ Gross ____ Year
											____ Net ____ Month
Previous Employer (if above is less than 2 years)					Address		Business Phone	Position/Occupation	How Long?		
					( )		( )		____ yrs. ____ mos.		
Source of Other Income (Income from Alimony, child support or separate maintenance payments need not be revealed if you do not choose to have it considered for this application)									Amount \$		
Name of Nearest Relative NOT Living With You					Address including City, State & Zip		Phone Number		Relationship		
							( )				

### 2. CO-APPLICANT INFORMATION

(COMPLETE THE FOLLOWING INFORMATION IF CO-APPLICANT OR SPOUSE IS APPLYING FOR A JOINT ACCOUNT. CO-APPLICANT WILL BE JOINTLY LIABLE FOR THE ACCOUNT.)

Last Name	First	Middle	Home Phone	Social Security Number	Date of Birth	Relationship to Applicant					
					/	/					
Home Address (Actual Street Address, cannot be P.O. Box, business address, or alternate address)					Apt #	City	State	Zip Code			
Previous Home Address (if above is less than 1 year)					City	State	Zip Code	<input type="checkbox"/> Own	<input type="checkbox"/> Live w/Parents	How Long?	
					<input type="checkbox"/> Rent	<input type="checkbox"/> Other	<input type="checkbox"/> Own Free & Clear	____ yrs. ____ mos.			
E-mail Address					Drivers License Number		State Issued				
Present Employer					Business Phone		Ext.	Verification No.	How Long?	*U.S. Citizen	
					( )		( )	( )	____ yrs. ____ mos.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Employer's Address					Kind of Business		Position/Occupation		Income		How Long?
									\$		____ Gross ____ Year
											____ Net ____ Month

ADDITIONAL CARDS FOR DEPENDENTS 18 YEARS OR OLDER: (IF YOU WISH TO HAVE ADDITIONAL CARD(S) ISSUED ON THIS ACCOUNT FOR USE BY A DEPENDENT(S), PLEASE PROVIDE THE FOLLOWING INFORMATION REGARDING THE DEPENDENT(S). APPLICANT (AND CO-APPLICANT, IF ANY) AGREE TO BE RESPONSIBLE FOR CHARGES MADE BY THE PERSONS IDENTIFIED BELOW.)

Last Name	First	Middle	Social Security Number	Date of Birth	Relationship to Applicant(s)					
					/	/				
Last Name	First	Middle	Social Security Number	Date of Birth	Relationship to Applicant(s)					
					/	/				

### 3. FINANCIAL INFORMATION

(PLEASE FURNISH THE INFORMATION ON YOUR MORTGAGE HOLDER (IF APPLICABLE) AND YOUR BANK. THIS INFORMATION IS REQUIRED FOR PROCESSING.)

Mortgage Holder	Account Number	Address	Name Acct. Carried In	Balance	Monthly Payment				
Your Bank Name	City & State	Checking Acct No.	Savings Acct No.	Loan No.					

\*Only U.S. Citizens are eligible for card issuance. Must reside in United States for card eligibility.

## ACCOUNT APPLICATION DISCLOSURE

<b>Interest Rates and Interest Charges</b>	
<b>Annual Percentage Rate (APR) for Purchases</b>	<b>0.00%</b> or <b>7.50%</b> introductory APR based on your creditworthiness for twelve billing periods from your account open date. After that your APR will be <b>7.50%</b> , <b>9.50%</b> or <b>11.50%</b> based on your creditworthiness. This rate will vary with the market based on the Prime Rate.
<b>APR for Balance Transfers</b>	<b>1.99%</b> or <b>7.50%</b> introductory APR based on credit worthiness, for twelve billing periods from the date of the balance transfer check.*  After that, your APR will be the same as your assigned purchase rate. This APR will vary with the market based on the Prime Rate.
<b>APR for Cash Advances</b>	<b>12.75%</b> , <b>14.75%</b> or <b>16.75%</b> based on your creditworthiness. This APR will vary with the market based on the Prime Rate.
<b>Paying Interest</b>	Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on purchases if you pay your entire balance by the due date each month. We will begin charging interest on cash advances on the transaction date.
<b>Minimum Interest Charge</b>	If you are charged interest, the charge will be no less than \$0.50.
<b>For Credit Card Tips from the Federal Reserve Board</b>	To learn more about factors to consider when applying for or using a credit card, visit the website of the Federal Reserve Board at <a href="http://www.federalreserve.gov/creditcard/">http://www.federalreserve.gov/creditcard/</a> .
<b>Fees</b>	
<b>• Annual Fee</b>	<b>\$35</b>
<b>• Additional Card Fee</b>	<b>\$5</b> per occurrence
<b>Transaction Fees</b>	
• Balance Transfer	<b>3%</b> of the transfer amount
• Cash Advance	Either <b>\$5</b> or <b>5%</b> of the amount of each cash advance, whichever is greater. (Maximum fee: <b>\$100</b> )
• Foreign Transaction	<b>3%</b> of each transaction in U.S. dollars.
<b>Penalty Fees</b>	
• Late Payment	Up to <b>\$35</b>
• Returned Payment	Up to <b>\$35</b>

\*Introductory APR offer for Balance Transfers: Balance Transfer option must be used by the end of the third month following account opening or the day you receive your card, whichever is later, to receive the 1.99% APR for six billing cycles on those balances. After that the standard APR for balance transfers will apply. You may only conduct a balance transfer using a balance transfer check, which you receive(d) with your account agreement.

**How We Will Calculate Your 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 account agreement.

Your account has a variable rate based on the Prime Rate. Your APR may increase based on the U.S. Prime Rate. The APRs will be determined monthly by adding a Spread to an Index. The Index for each billing cycle is the U.S. "Prime Rate" published in the Money Rates Table of the Wall Street Journal during the calendar month immediately preceding the calendar month in which the billing cycle ends. The Prime Rate in effect as of February 3, 2012 is 3.25%. A change in Prime Rate may increase your interest charges and the scheduled minimum monthly payment amount.

IBERIABANK MAY CHANGE THE ANNUAL PERCENTAGE RATE UPON 45 DAYS WRITTEN NOTICE TO THE CARDHOLDER. THE ANNUAL PERCENTAGE RATE WILL NEVER BE MORE THAN THE MAXIMUM RATE PERMITTED BY APPLICABLE LAW.

IBERIABANK  
P.O. BOX 7500 LITTLE ROCK, AR 72217-7500

In this Agreement the word "Issuer" means IBERIABANK.

Establishment of a credit line will be at the discretion of the Issuer, based on the information furnished on your application and supporting documents. This application is the property of IBERIABANK. No person or organization is authorized to reproduce, distribute, or solicit applications on behalf of IBERIABANK.

**IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT:**

To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act requires all financial institutions to obtain, verify, and record information that identifies each person (including business entities) who opens an account.

What this means for you: When you open an account, we will ask for your name, physical address, date of birth, taxpayer identification number, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. We will let you know if additional information is required.

**ARBITRATION:**

You understand that the Customer Agreement contains an Arbitration Provision that may limit your legal rights, including your right to go to court, to have a jury trial, and to participate in class actions.

**STATE LAW DISCLOSURES:**

**Married Wisconsin Residents:**

No agreement, individual statement, or court order, applying to marital property will adversely affect the creditor's interest unless the creditor, prior to the time credit is extended, is furnished with a copy of the agreement, statement or order, or has actual knowledge to the adverse provision when the obligation to the creditor has occurred.

**New York and Vermont Residents:**

Issuer may obtain, at any time, your credit reports for any legitimate purpose associated with the account or the application or request for an account, including but not limited to reviewing, modifying, renewing and collecting on your account. On your request, you will be informed if such a report was ordered. If so, you will be given the name and address of the consumer reporting agency furnishing the report. New York residents may contact the New York State Banking Department (1-800-518-8866) for a comparative list of credit card rates, fees, and grace periods.

**California Residents:**

Applicants: 1) may, after credit approval, use the credit card account up to its credit limit; 2) may be liable for amounts extended under the plan to any joint applicant. Regardless of your marital status, you may apply for credit in your name alone. As required by law, you are hereby notified that a negative credit report reflecting on your credit record may be submitted to a credit reporting agency if you fail to fulfill the terms of your credit obligations.

**Ohio Residents:**

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.

**Applicable Law:**

We are a bank (IBERIABANK) whose home state is Louisiana. Your Account and each advance of principal there under will be a loan made in Louisiana. Questions arising in connection with this Agreement or your Account will be decided by, as applicable, (i) Louisiana law, (ii) any laws of other states which are made applicable by laws of other states which are made applicable by laws of the State of Louisiana Revised Statutes, and (iii) the laws of the United States of America.

IBERIABANK has in the past sold and assigned all or part of its credit card portfolio to one or more financial institutions located in states other than Louisiana. At its sole discretion, IBERIABANK reserves the right to do so again, and any such sale may include any account IBERIABANK establishes for Applicant. IBERIABANK has also denied credit solely on the basis that the applicant previously had an account with IBERIABANK that was sold and assigned to another institution. In the event your account is sold to another institution, IBERIABANK reserves the right to deny your application for another credit card on this basis. In the event an account is sold to another institution, the purchaser may elect to offer account terms and conditions which differ from those offered by IBERIABANK and which may include an Annual Percentage Rate which is substantially higher than the Annual Percentage Rate offered by IBERIABANK. The purchaser may also offer account holders the option of rejecting the new terms and conditions, but it is highly probable that rejection of new terms and conditions offered by a purchaser would result in cancellation of the account holder's right to make purchases or obtain cash advances. In the event of such cancellation, IBERIABANK or the purchaser will, upon request and as applicable, refund a pro rata portion of the account holder's Annual Membership Fee. Payment of the Annual Membership Fee does not assure that the terms and conditions of an account will remain unchanged or that the account will continue throughout the annual period covered by the Fee.

By signing this application I am attesting I have read the IBERIABANK Terms and Conditions and agree to be bound as specified therein. I understand that in order to apply for this offer I must be able to download or print a copy of the Terms and Conditions provided herein and by applying I am attesting that I have downloaded or printed a copy of the Terms and Conditions. Furthermore, I am also attesting that I have reviewed the IBERIABANK Credit Card Privacy Notice which would give me the right to prohibit the bank from sharing information about me. I also acknowledge that I may exercise my rights to prohibit the Bank from sharing my information by selecting your opt out option(s) below:

For Privacy Information, please visit our website at <http://creditcards.iberiabank.com>.

- I Do Not Wish to Opt Out       Opt Out Affiliate Sharing  
For everyday business purposes       Opt Out both Affiliate & Non-Affiliate  
Sharing for marketing purposes       Opt Out Non-Affiliate Sharing

**APPLICANT'S STATEMENT: READ THIS STATEMENT BEFORE YOU SIGN IT.** All information I've given is true and correct. This IBERIABANK (the "Issuer") application is provided by a wholly owned subsidiary of IBERIABANK Corporation. I understand that the Issuer will confirm the information and retain the application whether or not my application is approved. A consumer credit report may be obtained and credit information exchanged and used in connection with this application and any credit update with respect to, or renewal of, the extension of credit requested by this application.

By signing this application, I consent to your obtaining a consumer credit report(s) and employment/income verification. I understand that, if I request, I will be informed whether any credit report was requested, and if so, the name and address of the consumer reporting agency furnishing the report. This offer is subject to the credit policies of the Issuer.

I AGREE TO BE BOUND BY THE AGREEMENT AND DISCLOSURE COVERING THIS ACCOUNT. I ACKNOWLEDGE AND AGREE THAT THIS APPLICATION IS SUBJECT TO ACCEPTANCE BY ISSUER IN LOUISIANA. IF IT IS ACCEPTED BY ISSUER IN LOUISIANA, THEN ANY EXTENSION OF CREDIT PURSUANT TO THIS APPLICATION AND ALL ADVANCES UNDER MY CREDIT CARD WILL BE LOANS MADE IN LOUISIANA AND WILL BE GOVERNED BY THE LOUISIANA AND FEDERAL LAWS APPLICABLE TO ISSUER'S BUSINESS IN LOUISIANA. BY SIGNING BELOW, I CERTIFY THAT I HAVE RECEIVED AND READ THE DISCLOSURE MADE WITH THE APPLICATION; AND I AGREE TO BE BOUND BY THE CARDHOLDER DISCLOSURE AND CREDIT CARD AGREEMENT (MEMBERSHIP RULES) GOVERNING THIS ACCOUNT IF AND WHEN MY APPLICATION IS ACCEPTED BY ISSUER IN LOUISIANA. IF THIS APPLICATION IS FOR A JOINT ACCOUNT, THIS STATEMENT AND MY AGREEMENTS APPLY TO BOTH OF US.

APPLICANT'S SIGNATURE X \_\_\_\_\_ Date \_\_\_\_\_

CO-APPLICANT'S SIGNATURE X \_\_\_\_\_ Date \_\_\_\_\_

Mail your completed application to: IBERIABANK, P.O. BOX 7500, LITTLE ROCK, AR 72217

For Bank Use Only



Product Code	Sub Product	Account Source	Credit Limit	No. Cards	Approvals	Date
Account #		Branch Name & Number		Sales Reference Name		A 1/11 D 1/11