

Swimming Pool Financing Application

Installation Information				
Amount Requested: \$	Purpose of Loan:	Name of Contractor:	Contact Name:	Phone Number

Applicant Information You may apply for a separate account even if you are married				
Name: Last		First	MI	Date of Birth
Social Security Number	Home Telephone Number	Work Telephone Number	<input type="checkbox"/> Married <input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (include single, divorced, widowed)
Home Address: Street		City	State	Zip
Previous Address: <i>(if less than 5 years at present address)</i>		City	State	Zip
Applicant's Employer Name		Occupation/Title	How Long? Years	Self Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Applicant's Gross Salary \$ Per Month	Other Income* \$ Per Month	*Please Describe Other Income		

* Notice: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered for repaying this loan.

Co-Applicant Information You may apply for a separate account even if you are married				
Name: Last		First	MI	Date of Birth
Social Security Number	Home Telephone Number	Work Telephone Number	<input type="checkbox"/> Married <input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (include single, divorced, widowed)
Co-Applicant's Employer Name		Occupation/Title	How Long? Years	Self Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Co-Applicant's Gross Salary \$ Per Month	Other Income* \$ Per Month	*Please Describe Other Income		

* Notice: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered for repaying this loan.

Residence Information			
1 st Mortgage Holder <i>(For Installation Residence)</i>		1 st Mortgage Balance \$	Monthly Payment \$
2 nd Mortgage Holder <i>(If Applicable)</i>		2 nd Mortgage Balance \$	Monthly Payment \$
Pmt. Includes Taxes & Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is this a Mobile Home? <input type="checkbox"/> Yes <input type="checkbox"/> No	If You Own the Land (if mobile home)? <input type="checkbox"/> Yes <input type="checkbox"/> No	# of Units at Installation Address: <input type="checkbox"/> Single Family <input type="checkbox"/> 2 Units <input type="checkbox"/> 3+ Units
How Long at Residence? Years	Amount Paid \$	Current Value \$	Type of Ownership: <input type="checkbox"/> Primary Residence <input type="checkbox"/> 2 nd Home <input type="checkbox"/> Investment
Apx. Square Footage of Home	Number of Bedrooms	Number of Bathrooms	Lot Size

Signature Authorization

By signing below, I/we certify that the information that I/we have given or will give is true and complete to the best of my/our knowledge. I/we authorize you, or a lender of your choice, to obtain information from my/our employer(s) and to obtain credit reports in connection with this application and for any update, renewal or extension of this financing transaction. I/we agree to provide additional information you, or a lender of your choice, may require to process this application including, but not limited to, true and complete federal income tax returns, employment verification, and income verification. I/we agree that the financed improvements may be verified at any time by a lender's representative or a designated contractor to ensure guideline compliance.

Applicant Signature

Date

Co-Applicant Signature

Date

