

**PART A: CREDIT APPLICATION
APPLICANT**

**COAST ELECTRIC POWER ASSOCIATION
PO BOX 1028
KILN, MS 39556**

MEMBER NO.		AMOUNT REQUESTED			
FIRST NAME		MIDDLE INITIAL	LAST NAME		
STREET ADDRESS					MONTHLY MORTGAGE PAYMENT
CITY		STATE	ZIP	HOW LONG?	HOME PHONE
FORMER ADDRESS			CITY	STATE	ZIP
DATE OF BIRTH	NUMBER OF DEPENDENTS		SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER
NAME OF NEAREST RELATIVE NOT LIVING WITH YOU				RELATIONSHIP	
ADDRESS		CITY	STATE	ZIP	
CURRENT EMPLOYER		HOW LONG?	POSITION		MONTHLY INCOME
ADDRESS		CITY	STATE	ZIP	
BUSINESS PHONE	PREVIOUS EMPLOYER				HOW LONG?
ADDRESS		CITY	STATE	ZIP	
OTHER INCOME SOURCE (Optional if derived from alimony, child support or maintenance payments)					MONTHLY AMOUNT

JOINT APPLICANT

JOINT APPLICANT (Complete only if _____ you wish to rely on this person's income for repayment, or _____ the other income above is derived from this person as alimony, child support or maintenance payments. Please check one.)

FIRST NAME		MIDDLE INITIAL	LAST NAME		
STREET ADDRESS					MONTHLY MORTGAGE PAYMENT
CITY		STATE	ZIP	HOW LONG?	HOME PHONE
FORMER ADDRESS			CITY	STATE	ZIP
DATE OF BIRTH	NUMBER OF DEPENDENTS		SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER
NAME OF NEAREST RELATIVE NOT LIVING WITH YOU				RELATIONSHIP	
ADDRESS		CITY	STATE	ZIP	
CURRENT EMPLOYER		HOW LONG?	POSITION		MONTHLY INCOME
ADDRESS		CITY	STATE	ZIP	
BUSINESS PHONE	PREVIOUS EMPLOYER				HOW LONG?
ADDRESS		CITY	STATE	ZIP	
OTHER INCOME SOURCE (Optional if derived from alimony, child support or maintenance payments)					MONTHLY AMOUNT

THESE QUESTIONS APPLY TO BOTH APPLICANT & JOINT APPLICANT

<i>If a "Yes" is given to a question, explain on an attached sheet.</i>	YES	NO	<i>If a "Yes" is given to a question, explain on an attached sheet.</i>	YES	NO
Have you any outstanding judgements?			Is your income likely to reduce in the next two years?		
In the last 10 years, have you been declared bankrupt or had debt adjustment under Chapter 13?			Have you had property foreclosed upon or given title or deed in lieu, thereof, in the last 7 years?		
Are you a party in a lawsuit?			Are you a co-endorser on an outstanding obligation?		
Are you other than a US Citizen or permanent Resident Alien?			If answer to above is yes: For Whom (Name of Endorser): _____ To Whom (Name of Creditor): _____		
YOUR REFERENCES (List banks where you have accounts)					
	ACCOUNT WITH	ADDRESS		ACCOUNT NUMBER	
CHECKING					
SAVINGS					

**CHECK BOX FOR APLICANT/JOINT APPLICANT.
LIST ALL ASSETS AND DEBTS — ATTACH OTHER SHEETS IF NECESSARY.**

ASSETS

Applicant		Describe (i.e. Auto, Stocks, Savings, etc.) List Home. List All Other Items You Own Free & Clear	Market Value	Pledged as Collateral for Another Loan?
Joint Applicant				
	Home		\$	___ YES ___ NO
	Auto		\$	___ YES ___ NO
	Other		\$	___ YES ___ NO
	Other		\$	___ YES ___ NO

DEBTS

		Creditor — Name and Address	Account Number	Present Balance	Monthly Payment	No. of Monthly Installments
	Mortgage (Inc. Tax & Ins.)			\$	\$	
	Second Mortgage			\$	\$	
	Auto Loan			\$	\$	
	Auto Loan			\$	\$	
	Credit Card			\$	\$	
	Alimony/ Spouse Support			\$	\$	
	Child Support			\$	\$	
	Other			\$	\$	
	Other			\$	\$	
	Other			\$	\$	
	Other			\$	\$	

List any names under which your credit references and credit history can be checked.

TOTALS

SIGNATURES

The above information is correct to the best of your knowledge and is a complete listing of ALL debts and obligations. You authorize Coast Electric Power Association to check your employment and credit history. You understand that it may be a federal crime to willfully and deliberately provide misleading or incorrect information on loan applications.

DATE _____	SIGNATURE _____
DATE _____	JOINT APPLICANT SIGNATURE _____



**POST OFFICE BOX 1028
KILN, MS 39556**