



7401 Yukon Dr. ~P O Box 730 Bismarck ND
58502-0730

RESP LOAN CREDIT APPLICATION

ABOUT YOURSELF

First Name: _____	Middle Name: _____	Last Name: _____					
Street Address: _____	Email: _____						
City: _____	<table border="1"> <tr><td>Own: _____</td></tr> <tr><td>Rent: _____</td></tr> <tr><td>Payment: _____ Per Month</td></tr> <tr><td>How Long: _____</td></tr> <tr><td>If less than five years, give previous address: Address: _____</td></tr> </table>		Own: _____	Rent: _____	Payment: _____ Per Month	How Long: _____	If less than five years, give previous address: Address: _____
Own: _____							
Rent: _____							
Payment: _____ Per Month							
How Long: _____							
If less than five years, give previous address: Address: _____							
State: _____							
Zip Code: _____							
Home Phone: _____							
Social Security #: _____							
Birth Date: _____							
Nearest Relative Not Living With You:							
Name: _____	Relationship: _____						
Street Address: _____	Phone No.: _____						
City / State: _____	Zip Code: _____						

INSTALLATION LOCATION OF ITEMS BEING FINANCED

I am requesting loan funds for: _____ <small>(i.e. Plenum Heater, Ground Source Heat Pump, Air-to-air heat pump, etc.)</small>
Street Address: _____ City: _____ State: _____
Legal Description: (i.e. if Platted--Lot 7 Block 1, xxxxxx addition to City of xxxxxxxx, xxxxxxxx County, ND (i.e. if Rural--NE 1/4 or NE 1/4 of Section XX, Township xxx, Range xx W, xxxxxxxx County, ND

ABOUT YOUR WORK

Employer: _____	Position: _____
Address: _____	Salary: _____ per Month
City / State: _____	Phone: _____
Zip Code: _____	
Income Other Than Above: Source: _____	Amount / Month: _____

ADDITIONAL PERSON'S INCOME: (COMPLETE IF RELIED UPON FOR PAYMENT)

First Name:		Middle Initial:		Last Name:	
Social Security #:		Birth Date:			
Employer:		Business Phone:			
Position:		Salary / Month:			

ABOUT YOUR FINANCIAL REFERENCES:

	Account With	Address	Account No.	Balance	Monthly Payment
Checking					
Savings					
Mortgage #1					
Mortgage #2					
Loan #1					
Loan #2					
Loan #3					
Loan #4					
Credit Card					
Credit Card					
Credit Card					
Credit Card					
Credit Card					
Other					
(Attach additional sheets as necessary)					

CREDIT INFORMATION RELEASE APPROVAL:

I give Capital Electric Cooperative, Inc. the approval to request and review my credit information which can be obtained from any local credit agency.

Signed: _____ Date: _____

Signed: _____ Date: _____