

NOFA Vermont Revolving Loan Fund

Personal Data Sheet

Note: If applying jointly, please fill out the general applicant and joint applicant information on both sides.

General Applicant Information

Name (last, first, & middle initial) _____

Social Security # _____ Date of Birth _____ # of dependents _____

Mailing Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

Applicant Employment

Firm or employer's name _____

Employer's address _____

City _____ State _____ Zip Code _____ Yrs/mo there _____

Occupation _____ Net monthly pay _____

Business phone # _____ Supervisor's Name _____

Other Income \$ _____ Source _____

Note: alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Contact person _____ Phone _____

Applicant Deposit Accounts

Account	Name of Institution	Account Number	Balance
Checking			
Savings			
CD			
Other			
Other			

Applicant Financial Obligations

Living Arrangements Rent _____ Own _____ Live with relative _____
Landlord or mortgage holder _____ Phone # _____
Monthly rent or mortgage payment _____ Monthly utilities _____
Farm Insurance policy _____ Phone # _____
Address: _____

Other Obligations/References

Note: Failure to list all outstanding debts may disqualify this application (include alimony, child support, etc....)

Creditor's Name	Type of Loan	Account #	Unpaid Balance	Monthly Payment
1.				
2.				
3.				
4.				

Collateral Description (if applicable)

Briefly describe the property to be given as security, the value and how the value was determined:

Seller's Name _____ Phone: _____

Address _____

Comments

I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved. By signing below, I authorize you, and any duly authorized agents, to obtain and use credit reports, employment verification, and to exchange credit information in connection with this application and any update, renewal, account review or extension you may require. It is understood that a photocopy of this form will also serve as authorization. I understand that I must update this credit information at your request and/or if my financial condition changes.

Applicant's Signature

Date