EnergyRight Solutions Loan Program Application

Application for:	
HVAC Equipment Only Weatherization Only HVAC Equipment and Weatherization No. of HVAC Units	
Amount of loan requested (if known):	Program Info
Please check if you are applying: Single Applicant Joint Applicant IF YOU INTEND TO APPLY FOR JOINT CREDIT, PLEASE INITIAL HERE: Applicant's Initials Co-Applicant's Initials	
Local Power Company	ID#
Primary Applicant Information	Secondary Applicant Information
First Name Last Name	First Name Last Name
SSN# Date of Birth	SSN# Date of Birth
☐ Mailing Address ☐ Installation Address (check all that apply)	☐ Mailing Address ☐ Installation Address (check all that apply)
Street Address	Street Address
City State ZIP	City State ZIP
Primary Phone	Primary Phone
Secondary Phone	Secondary Phone
Driver's License State Number	Driver's License State Number
Previous Address (if less than 3 years at current address)	Previous Address (if less than 3 years at current address)
Street Address	Street Address
City State ZIP	City State ZIP
Installation Address (if different from mailing address)	
Street Address	
City State ZIP	
Is this a Manufactured Home? Yes No If "YES" and applicant does not own the land where the home is located, please provide the name of the landowner	
Acknowledgement and Signatures By signing below, applicant and co-applicant, if any (Applicants), understand and agree that: (1) The program financing will involve security arrangements (lien filed on property) which may make it more difficult to obtain financing for your home; (2) Applicants must provide and maintain satisfactory security arrangements for the requested loan; (3) Applicants reveal and are responsible for any outstanding EnergyRight loan balances, and the loan request reflects the maximum amount allowed reduced by any outstanding balances; (4) Providing a social security numbers will expedite consideration of this application; and (5) Applicants will be informed if this application is not approved. Applicants certify that everything stated in this application is correct to the best of their knowledge. Applicants authorize and permit Local Power Company to perform background checks and obtain information about Applicant(s) from credit reporting sources.	
Applicant's Signature	Date
Co-Applicant's Signature	Date
Local Power Company use only	
Electric Account # QCN Contractor Name (if known)	
QCN ID# QCN Contact Name QCN Not Yet Selected	
This Application was taken: In Person or Mail/Fax By Phone Program Acknowledgement read/mailed to applicant	
Bank use only	
Approved Denied Date Loan Approval Number	
Loan Reference Number Amount Funded	Date Funded