

RESIDENTIAL CREDIT APPLICATION

APPLIANCE & ELECTRONICS SALES

TO:

FROM:

Credit Specialist
Appliance Sales Section

COMPANY:

DATE:

Alabama Power

FAX NUMBER:

TOTAL NO. OF PAGES, INCLUDING COVER:

205-226-1635

RE:

Applying for Credit

You will be contacted the next business day after receiving your request. Please fill in the following information so we can process your request in a timely manner.

- 1) Which product(s) you wish to purchase: _____
 - 2) Approximate loan amount to be financed: \$ _____
 - 3) Which of our store locations do you prefer to shop? _____
 - 4) Preferred method to contact you:
Home Phone Number:
 Include area code: _____

Work Phone Number:
 Include area code: _____

E-mail address: _____
-
-

APPLICATION FOR ALABAMA POWER MERCHANDISE FINANCING

SECTION A - TELL US ABOUT YOURSELF (Please print in black ink.)							
Last Name		First Name			Middle Name		
Home Address Number and Street						Apt. No.	
City		State	Zip	How Long?		Own	Rent
				yrs. mos.		<input type="checkbox"/>	<input type="checkbox"/>
Mailing Address (If different than Home Address)				City		State	Zip
Previous Address Number and Street (If less than 2 Years at current address)						Apt. No.	
City		State	Zip	How Long?			
				yrs. mos.			
Home Phone Number		Cell Phone			Date of Birth		
()		()			/ /		
Social Security Number		Driver's License Number or Other Picture ID Verified			Are you currently in Bankruptcy?		
		State:	No:	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Name of Employer						How Long?	
						yrs. mos.	
Address of Employer (Number & Street)							
City		State	Zip	Business Phone ()			
Job or Position				Email Address			
Monthly "Take Home" Pay		Amount and Source of Other Income*					
\$		\$	Source:				
Name of Previous Employer (If less than 2 years with current employer)						How Long?	
						yrs. mos.	
Address of Previous Employer (Number & Street)							
City		State	Zip	Relationship			
Nearest Relative Not Living With You						Relationship	
Relative Address (Number & Street)						Apt. No.	
City		State	Zip	Phone Number ()			
Name of Additional Contact						Phone Number	
						()	

*Alimony, Child Support or Separate Maintenance income need not be revealed if you do not want to disclose such income and do not want it to be considered in the credit decision.

Merchandise To Be Financed:	
Address at which merchandise will be kept:	Cost: \$

By signing below I (1) certify that (a) the information given in this application is true and complete; and (b) if this application is signed by two applicants, we are applying for joint credit, and each of us will be responsible for the full amount owed at any time, and (2) authorize Alabama Power Company: (a) to check my credit and employment history to determine credit worthiness; (b) to report credit and payment history with Alabama Power to others; and (c) to send information and offers about Alabama Power's products and services to me at the email address shown above.

Applicant's Signature _____ Date _____

For APC Use Only:		Application taken by telephone? YES <input type="checkbox"/> NO <input type="checkbox"/>	
CSS Acct #: _____		Continuous Service Date: ____/____/____	
Customer CSS Credit Score: _____		Interconnect App # (last 6 digits): _____	
Interconnect Decision: _____			

SECTION B - YOUR JOINT APPLICANT (Please print in black ink.)					
Last Name		First Name		Middle Name	
Home Address (Number & Street)				Apt. No.	
City		State	Zip	How Long?	Own Rent
				yrs. mos.	<input type="checkbox"/> <input type="checkbox"/>
Mailing Address (If different than Home Address)			City	State	Zip
Previous Address (Number & Street) (If less than 2 Years at current address)				Apt. No.	
City		State	Zip	How Long?	
				yrs. mos.	
Home Phone Number		Cell Phone		Date of Birth	
()		()		/ /	
Social Security Number		Driver's License Number or Other Picture ID Verified		Are you currently in Bankruptcy?	
		State:	No:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Name of Employer				How Long?	
				yrs. mos.	
Address of Employer (Number & Street)					
City		State	Zip	Business Phone ()	
Job or Position		Email Address			
Monthly "Take Home" Pay		Amount and Source of Other Income*			
\$		\$	Source:		
Name of Previous Employer (If less than 2 years with current employer)				How Long?	
				yrs. mos.	
Address of Previous Employer (Number & Street)					
City		State	Zip	Relationship	
Nearest Relative Not Living With You					
Relative Address (Number & Street)				Apt. No.	
City		State	Zip	Phone Number ()	
Name of Additional Contact				Phone Number	
				()	

*Alimony, Child Support or Separate Maintenance income need not be revealed if you do not want to disclose such income and do not want it to be considered in the credit decision.

Merchandise To Be Financed:	
Address at which merchandise will be kept:	Cost: \$

By signing below I (1) certify that (a) the information given in this application is true and complete; and (b) if this application is signed by two applicants, we are applying for joint credit, and each of us will be responsible for the full amount owed at any time, and (2) authorize Alabama Power Company: (a) to check my credit and employment history to determine credit worthiness; (b) to report credit and payment history with Alabama Power to others; and (c) to send information and offers about Alabama Power's products and services to me at the email address shown above.

Joint Applicant's Signature _____ Date _____

For APC Use Only:		Application taken by telephone? YES <input type="checkbox"/> NO <input type="checkbox"/>	
CSS Acct #: _____	Continuous Service Date: _____/_____/_____		
Customer CSS Credit Score: _____	Interconnect App # (last 6 digits): _____		
Interconnect Decision: _____			