



Trident Funding Corporation

APPLICATION FOR SECURED CREDIT

HOW WILL YOU BE APPLYING: Individually Jointly LLC or Corporate Trust HOW DID YOU HEAR ABOUT US? _____

TRANSACTION INFO		<input type="checkbox"/> Purchase		<input type="checkbox"/> Pleasure		<input type="checkbox"/> Dealer or Broker		Purchase Price Or Present Value		
		<input type="checkbox"/> Refinance or Cash Out		<input type="checkbox"/> Liveaboard		<input type="checkbox"/> Private Sale				
VESSEL DESCRIPTION		<input type="checkbox"/> New		Dealer/Broker or Seller Name				Equip. Adds		
		<input type="checkbox"/> Used								
Model Year	L.O.A.	Beam	Builder or Manufacturer			Type (i.e. Motor Yacht, etc.)			Sales Tax _____ %	
Model		Engine(s) Mfgr		<input type="checkbox"/> Single		<input type="checkbox"/> Gas		H.P.		
				<input type="checkbox"/> Twin		<input type="checkbox"/> Diesel				
Boating Experience (Describe last two vessels owned)				Description of Trade				Net Trade Or Equity		
BORROWER		First Name		Middle Initial		Last Name			Cash Down	
Home Address				Social Security No.		Date of Birth			Loan Amount	
City				State		Zip		<input type="checkbox"/> Own No.Years		
								<input type="checkbox"/> Rent _____		
RESIDENCE PH.		BUSINESS PH.		CELL PH.		E-MAIL		TERM:		
()		()		()				()		
Previous Address				City		State		Zip		
								<input type="checkbox"/> Own No. Years _____		
								<input type="checkbox"/> Rent _____		
Nearest Relative not Living w/You		Relationship	Address, City, State, Zip						Home Phone	
									()	
EMPLOYER		Firm Name				Position		No. Yrs.		
Address		City		State		Zip		Type of Business		
Previous Employer		City		State		Zip		Position		
								No. Yrs.		
CO-APPLICANT		First Name		Middle Initial		Last Name			Home Phone	
									()	
Home Address				<input type="checkbox"/> Own		No. Yrs.		Work Phone		
				<input type="checkbox"/> Rent				()		
City		State	Zip	Date of Birth		Social Security No.			Relationship to Applicant	
EMPLOYER		Firm Name				Position		No. Yrs.		
Address		City		State		Zip		Type of Business		
ANNUAL INCOME		WAGES	INTEREST/DIV	NET RENTAL	DISTRIBUTIONS	PENSIONS/SS INC	OTHER INCOME	TOTAL INCOME		
Applicant										
Co-Applicant										
MO. RENT OR MTGE PMT (residence)				MTGE PAYABLE TO (list name and acct #)				TOTAL OTHER MONTHLY PMTS		

- I (we) authorize Trident Funding Corporation to obtain information in connection with this application including credit investigation, employment history and any other information necessary to evaluate credit. Upon request, I (we) will be informed as to whether or not a credit report was requested by Trident Funding Corporation in conjunction with this application and if a report was requested, I (we) will be informed as to the name and address of the consumer reporting agency that furnished the report. Furthermore, this application shall remain the property of Trident Funding Corporation.
- Income derived from alimony, child support or other maintenance payments need not be disclosed when applying for credit.
- I (we) have read the foregoing information carefully and certify that it is true, correct and complete.

PLEASE SIGN BELOW

DATE

Applicant _____

Are you a U.S. Citizen? _____

If not, What Country? _____

Co-Applicant _____

Are you a U.S. Citizen? _____

If not, What Country? _____