

HOW DID YOU HEAR ABOUT US?	TF CLIENT NUMBER
HOW WILL YOU BE TAKING TITLE? <input type="checkbox"/> INDIVIDUALLY <input type="checkbox"/> JOINTLY <input type="checkbox"/> LLC OR CORP. <input type="checkbox"/> TRUST	
<input type="checkbox"/> PURCHASE <input type="checkbox"/> REFINANCE	<input type="checkbox"/> NEW <input type="checkbox"/> USED
<input type="checkbox"/> DEALER/BROKER <input type="checkbox"/> PRIVATE PARTY	
WILL THIS VESSEL BE USED AS A DWELLING / RESIDENCE (primary or otherwise)? <input type="checkbox"/> YES <input type="checkbox"/> NO	

APPLICANT	FIRST NAME, MIDDLE INITIAL, LAST NAME			DATE OF BIRTH	SS#	
	HOME ADDRESS, CITY, STATE, ZIP			NO. YRS.	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	MO. MTG/RENT PMT \$
	RESIDENCE PHONE	CELL PHONE	BUSINESS PHONE	EMAIL		
	PREVIOUS ADDRESS, CITY, STATE, ZIP				NO. YRS.	<input type="checkbox"/> OWN <input type="checkbox"/> RENT
	COMPANY OR EMPLOYER NAME		TYPE OF BUSINESS	POSITION	NO. YRS.	
	ADDRESS, CITY, STATE, ZIP					
	PREVIOUS EMPLOYMENT		TYPE OF BUSINESS	POSITION	NO. YRS.	

CO-APPLICANT	FIRST NAME, MIDDLE INITIAL, LAST NAME			DATE OF BIRTH	SS#	
	HOME ADDRESS, CITY, STATE, ZIP			NO. YRS.	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	RELATIONSHIP TO APPLICANT
	RESIDENCE PHONE	CELL PHONE	BUSINESS PHONE	EMAIL		
	COMPANY OR EMPLOYER NAME		TYPE OF BUSINESS	POSITION	NO. YRS.	
	ADDRESS, CITY, STATE, ZIP					

ANNUAL INCOME	WAGES	INTEREST / DIVIDENDS	DISTRIBUTIONS	PENSION	NET RENTAL	OTHER INCOME	TOTAL INCOME
APPLICANT							
CO-APPLICANT							

VESSEL DESCRIPTION	BUILDER/MANUFACTURER				
	MODEL YR.	MODEL	LENGTH	CLASS	
	ENGINE MFGR.	<input type="checkbox"/> GAS <input type="checkbox"/> DIESEL		MILEAGE	
	TRADE DESCRIPTION				

PURCHASE PRICE	
SALES TAX _____%	
TOTAL COST	
NET TRADE OR EQUITY	
CASH DOWN	
LOAN AMOUNT	
TERM	<input type="checkbox"/> 20 YRS <input type="checkbox"/> 15 YRS <input type="checkbox"/> 10 YRS <input type="checkbox"/> OTHER

Please Sign Below

Applicant _____ Date _____

Are you a U.S. Citizen? (Y / N) If not, what country? _____

Co-Applicant _____ Date _____

Are you a U.S. Citizen? (Y / N) If not, what country? _____

- I (we) authorize Trident Funding LLC, its Assigns, and/or their Lenders to obtain information in connection with this application, including credit inquiries/reports, 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 LLC in conjunction with this application and if a report was requested. I (we) will be informed the name and the address of the consumer reporting agency that furnished the report. Furthermore, this application shall remain the property of Trident Funding LLC.
- 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.
- PATRIOT ACT NOTICE:** To help the government fight the funding of terrorism and money laundering activities, Federal Law requires all financial institutions to obtain verify and record information that identifies each person who opens an account. For the purposes of this section, account shall be understood to be loan accounts.
- Acknowledgement by Co-Applicant:** By providing co-applicant information, you confirm your intent to apply for joint credit and be jointly liable for the debt.
- You agree as follows: On each phone number that you give us on this application, whether landline or cell phone. You consent to us, our affiliates, our agents, and assignees of any of us contacting you at the number by calling, texting or sending another electronic message from time to time for any reason about your accounts, including but not limited to for collection and payment purposes. You agree that automated dialing, equipment, or pre-recorded voice messages may be used for any of those purposes.