

INTERCOASTAL FINANCIAL GROUP, INC.

If this is an application for joint credit with another person, complete all sections providing information in the CO-APPLICANT section about the joint applicant.

We intend to apply for joint credit.
(PLEASE INITIAL) _____ Applicant _____ Co-Applicant

How did you hear about us?

JOEY GOTTFRIED
2105 Brickton Station, Buford, GA 30518
Tel: 770-271-4053 or 800-439-7662
Fax: 770-271-4086 or 877-271-4086
E-Mail: joey@boatloans.net
Website: www.RecreationLending.com

Prefix <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.		Suffix <input type="checkbox"/> Jr. <input type="checkbox"/> Sr. <input type="checkbox"/> III		First Name		Middle Initial	Last Name		U.S. Citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Present Street Address				City		State	Zip Code		Time At Address ____ Years ____ Months		
Home Phone () ()		Cellular Phone () ()		E-Mail Address		Social Security No.			Date of Birth		
Previous Street Address (If less than 3 years at current address)				City		State	Zip Code		Time At Address ____ Years ____ Months		
Current Employer or Name of Your Business			Employer / Business Address						City	State	Zip Code
Length of Employment ____ Years ____ Months			Business Phone No. () ()			Position					
Previous Employer (If less than 3 years at current job)			Previous Employer Address						City	State	Zip Code
Nearest Relative		Relationship		Telephone No. () ()		Street Address		City	State	Zip Code	

Co-Applicant Relationship to Applicant: _____

Prefix <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.		Suffix <input type="checkbox"/> Jr. <input type="checkbox"/> Sr. <input type="checkbox"/> III		First Name		Middle Initial	Last Name		U.S. Citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Present Street Address				City		State	Zip Code		Time At Address ____ Years ____ Months		
Home Phone () ()		Cellular Phone () ()		E-Mail Address		Social Security No.			Date of Birth		
Previous Street Address (If less than 3 years at current address)				City		State	Zip Code		Time At Address ____ Years ____ Months		
Current Employer or Name of Your Business			Employer / Business Address						City	State	Zip Code
Length of Employment ____ Years ____ Months			Business Phone No. () ()			Position					
Previous Employer (If less than 3 years at current job)			Previous Employer Address						City	State	Zip Code

Income Information

Applicant Salary \$		<input type="checkbox"/> Monthly <input type="checkbox"/> Annually	Co-Applicant Salary \$		<input type="checkbox"/> Monthly <input type="checkbox"/> Annually	***NOTICE: 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.					
Applicant Other Income \$		<input type="checkbox"/> Monthly <input type="checkbox"/> Annually	Source of Income			Co-Applicant Other Income \$		<input type="checkbox"/> Monthly <input type="checkbox"/> Annually	Source of Income		

Credit Information

Mortgage Company or Landlord		Account Number (optional)			Payment \$	<input type="checkbox"/> Buy <input type="checkbox"/> Rent <input type="checkbox"/> Parents <input type="checkbox"/> Paid in Full
Other Creditors		Account Number (optional)			Balance	Monthly Payment
Car Loan					\$	\$

Boat Data

<input type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> Refinance		Manufacturer		Year	Model		Length	
Trailer Included? <input type="checkbox"/> Yes <input type="checkbox"/> No		Options and Accessories						
HULL <input type="checkbox"/> Wood <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal		Engine Manufacturer			<input type="checkbox"/> Gas <input type="checkbox"/> Single <input type="checkbox"/> Diesel <input type="checkbox"/> Twin	H.P./Eng. _____		BOAT USAGE <input type="checkbox"/> Private <input type="checkbox"/> Commercial <input type="checkbox"/> Charter
Selling Price (include tax) \$		Cash Down Payment \$		Trade Allowance \$		Debt on Trade \$		
Amount to Finance \$		Term: _____ Years		Description of Trade (year, make, model)		Seller's Name	Seller's Phone #	

Applicant and Co-Applicant, if any, make this statement of their assets and liabilities to obtain credit for the financing of the boat described in Boat Data. The facts in this Personal Financial Statement are true as of its date and may be relied upon by Intercoastal Financial Group, Inc. or any financial institution designated by Intercoastal Financial Group, Inc. Any material changes in the information given prior to closing shall be reported to Intercoastal Financial Group, Inc. Applicant and Co-Applicant, if any, authorize Intercoastal Financial Group, Inc. to review the Applicants's and Co-Applicant's, if any, credit history and employment and to disclose any inquiry in relation with the credit experiences with the Applicant and Co-Applicant.

Signature of Applicant

Date

Signature of Co-Applicant

Date

PERSONAL FINANCIAL STATEMENT

(Required On Most Loans Over \$50,000.00)

ASSETS	VALUE	LIABILITIES	BALANCE
Cash on Hand and in Banks		Credit Cards	
Deposit on Boat Being Purchased (if already made)		Vehicle Loans	
Marketable Securities (stocks, bonds, mutuals, etc.)		Boat Loans	
Boats		Recreation Vehicle Loans	
Recreational Vehicles		Real Estate Mortgages (total from Schedule 2)	
Real Estate (total from Schedule 1)			
Retirement Accounts (401K, IRA, etc.)		Notes Payable - Others (List)	
Life Insurance (cash surrender value)			
Vehicles			
Other Assets (List)			
		TOTAL LIABILITIES	
TOTAL ASSETS		NET WORTH (Total Assets less Total Liabilities)	

Schedule 1 - Real Estate List your residence on Line 1. (Supply separate list if you own more than 3 properties)

#	ADDRESS OF PROPERTY	Rental Income (if any)	Year Purchased	Purchase Price	Current Market Value
1					
2					
3					
	TOTAL				

Schedule 2 - Real Estate Mortgages - List mortgages that correspond to real estate in Schedule 1

#	TO WHOM PAYABLE (LENDER NAME)	Monthly Payment	Approximate Balance
1			
2			
3			
	TOTAL		

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guarantee of the undersigned. The undersigned acknowledge and understand that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guarantee thereof. Each of the undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of any of the undersigned to perform its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein, and to determine the credit-worthiness of the undersigned. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned.

Applicant _____ Date _____ Co-Applicant _____ Date _____