



It's as easy as 1, 2, 3 to get hooked up with up to 60 months of 0% interest for purchases (including materials & labor) up to \$10,000.00.

Payments are simply added to your monthly City of Dublin gas bill.

### Residential Homeowners Loan Application

Applicant			
Full Name:		Date of Birth:	
Home Address:		Email Address:	
Mailing Address (if different)			
City, State, Zip Code:		Do you occupy this residence?	
Home Phone Number:		Do you own this residence?	
How long have you lived at this address?			
Applicant's Employment Information			
Name of Employer:		How long at this job?	
Work Address:		Work Phone Number:	
City, State, Zip Code:		Job or Position:	
Monthly wages or salary:			
Have you filed or are you filing for bankruptcy?			
Optional: Other sources of income & amount?			
Any judgments against your income? If so, how much monthly?			
Income Other Than the Applicant's (Optional)			
Full Name:		Date of Birth:	
Relationship to Applicant: Married <input type="radio"/> Separated <input type="radio"/> Other: <input type="radio"/>			
Name of Employer:		How long at this job?	
Work Address:		Work Phone Number:	
City, State, Zip Code:		Job Title:	
Monthly wages or salary:			
Have you filed or are you filing for bankruptcy?			
Optional: Other sources of income & amount?			
Any judgments against your income? If so, how much monthly?			
<b>By signing below, the applicant certifies the information in this application is true and complete.</b>			
<ul style="list-style-type: none"><li>▪ I own the residence in which the installation or improvements will be done.</li><li>▪ I authorize the City of Dublin to check my credit and employment history to determine creditworthiness.</li><li>▪ I agree to pay the loan in full if the residence where the improvements are made is sold prior to the loan term expiration.</li><li>▪ I agree to follow all the guidelines of the Dublin Natural Gas On-Bill Financing Program.</li></ul>			
Applicant Signature:		Date:	Qualified Contractor:
Requested Terms: \$		Months:	Monthly Payment: + \$3.00 Admin charge
INTERNAL	24 Months Utility History:	Credit Rating:	Date Work Inspected:
Approved By (Authorized Program Supervisor):			Date Loan Issued:



Have questions? Call or email us at (478) 277-5048 or [bakery@dublinga.org](mailto:bakery@dublinga.org)



## Homeowner Installation Approval Form

Homeowner's Information	
Last Name:	First Name:
Service Address:	
Account #:	
City, State, Zip Code:	
Phone:	Contact Name:
Contractor's Information	
Business Name:	Phone:
Contractor Name:	
License #:	Remarks:

Qty	Gas Appliance Installed	Manufacturer	Serial No.	Replaced Appliance	Fuel Replaced

For final approval of the loan issued by the City of Dublin all of the above information on this form must be completed. Attach copies of receipts as proof of purchase and installation of appliance. All installations are subject to inspection.

The Main Street On-Bill Finance Program offers the homeowner the option to pay a fixed monthly amount for qualified equipment purchases if the following conditions are met:

1. By signing this form in the space provided, homeowner represents that he/she is the owner of the record of the residence where the equipment is being installed ("property").
2. Homeowner agrees to be responsible for the total outstanding amount upon the sale or transfer of the property. If the property is sold or transferred prior to the satisfaction of the loan through the Main Street On-Bill Financing Program.
3. Homeowner agrees that all material and workmanship matters related to the equipment will be addressed exclusively with the licensed contractor responsible for installing the equipment.

By signing this form, the homeowner agrees to the terms set forth herein.

Contractor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Homeowner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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