

PART I					
Applicant's First Name		Applicant's Last Name		Social Security or Tax ID#	Marital Status
Co-Applicant's First Name		Co-Applicant's Last Name		Social Security or Tax ID#	Marital Status
Property address (number and street) <sup>1</sup>			City/Town	State <b>VT</b>	Zip
Email address					
Mailing address (if different from above)			City/Town	State <b>VT</b>	ZIP
SPAN Number (from property tax bill)			Current property tax assessment amount (from property tax bill)		
Mortgage Holder (First Lienholder)				Outstanding Principal Balance	
Mortgage holder(List Second and any additional lienholders)				Total Outstanding Principal Balance(s)Second & all additional lien holders:	
PART II					
1.	Is the property a residential dwelling located in a VT PACE Special Assessment District? <sup>1</sup>				
2.	Are you delinquent with respect to property taxes and/or sewer charges?				
3.	Is the property subject to any property tax, federal, state or municipal liens?				
4.	Is there a reverse mortgage on the property?				
5.	Is the property subject to a mortgage or other lien for which there is a default, foreclosure or delinquency that has not been cured?				
6.	Is the property subject to any unsatisfied judgment, mechanics, material men or architect liens?				
7.	Are there any overdue payments on mortgages or other liens secured by the property?				
8.	Are there any "yes" responses to questions 3 through 8?				
PART III					
Gross Monthly Income (Source)	Applicant	Co-Applicant	Total Monthly Income	Gross Monthly Expenses (Type)	Current Monthly Payments:
Base Employment Income (Salary)				First Mortgage (Principal & Interest)	
Overtime, Bonus or Commissions				Real Estate Taxes, Homeowner's Insurance and Association Fees	
Dividends/Interest				Credit & Charge Cards	
Net Rental Income				Installment Loans	
Self Employed Income (profit or loss)				Other	
Total Income:				Total Expense:	
Applicant's Employer's Name			Co-Applicant's Employer's Name		
PART IV					
<p>By signing this form, the Applicant(s) hereby certifies that the information provided is true and correct as of the date set forth opposite the signature(s) and understand that any intentional or negligent misrepresentation(s) of the information contained in this application may result in legal consequences.</p> <p>We take your financial privacy very seriously. During the course of processing your application, we accumulate non-public personal financial information from you and from other sources about your income, your assets, and your credit history in order to allow us to make an informed decision about granting you credit. We restrict access to nonpublic personal information about you to those employees who need to know that information to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.</p> <p>We collect nonpublic information about you from the following sources: (i) information we receive from you on applications or other forms; (ii) information about your transactions with us, our affiliates, or others; and (iii) information we receive from a consumer reporting agency.</p> <p>We do not disclose any nonpublic information about our customers or former customers to any third party, except as permitted by law and/or as required by this PACE Program.</p> <p><b>By signing below I/we agree to and accept the terms above.</b></p>					
Applicant's signature ➤			Date ➤		
Co-Applicant's signature ➤			Date ➤		

<sup>1</sup> The property must be located in a municipality which has voted to designate itself as a PACE district and that has enacted a PACE program.  
Instructions: Please complete this PACE application in full. All PACE applicant's (property owners) must sign and date the application.

**PART V**

**PACE FEE:** Elect how you would like to pay the PACE Program Application fee by checking one of the following options:

I have included a Check (Payable to “Opportunities Credit Union”) with my PACE application

**ACH/Electronic Payment Authorization:** I hereby authorize Opportunities Credit Union (hereinafter called "OCU"), to debit my account via electronic funds transfer at the financial institution named below for the amount of the PACE Application Fee (“PACE Fee”) as per the following instructions. I acknowledge that it is my responsibility to provide correct routing and account numbers to OCU.

Financial Institution’s Name**	Financial Institution’s Routing/ABA#	Account Type	Your Account # to be charged	Amount Authorized to be charged to
				\$350

**\*\*Attach voided check/deposit slip for the designated account if available.**

- Please note that upon receipt of your PACE application, OCU will debit your financial institution (if this option is elected) and will credit your PACE Fee as per the PACE program description. The description for the transaction on your account statement will indicate "Opportunities Credit Union ACH Transfer." This fee is not refundable.
- I/we acknowledge that it is my responsibility to insure that there are sufficient funds in my/our account at the designated financial institution to make this ACH payment. In the event that funds are not available in my/our above designated account and the ACH entry is returned, OCU will assess a returned item fee, as stated in OCU’s Rate and Fee Schedule. Upon such an occurrence, I agree to make timely payment of the PACE fee via cash or check payable to: Opportunities Credit Union.
- My authorization is to remain in full force and affect unless OCU has received written notification from me of its termination in such time and in such manner as to afford OCU a reasonable opportunity to act on it.

**ACCOUNT HOLDER INFORMATION, SIGNATURES AND CERTIFICATIONS (for member share account)**

By signing below, I/we agree to the terms and conditions of the Membership and Account Agreement, Truth in Savings, Rate and Fee schedule, The Patriots Act, Funds Availability Policy Disclosure, Electronic Funds Transfer Agreement, if applicable, and to any amendment Opportunities Credit Union makes from time to time which are incorporated herein. I/we acknowledge receipt of a copy of the Agreement and Disclosures applicable to the accounts and services requested herein which are available at: [www.oppvt.org/memberservices/account-disclosures](http://www.oppvt.org/memberservices/account-disclosures)

**TIN CERTIFICATION AND BACKUP WITHHOLDING INFORMATION**

By signing below, I/we certify in accordance with the IRS w-9 instructions provided by the Credit Union and under penalties of perjury, that the Social Security number/Taxpayer Identification number shown is my/the correct identification number and that:

- I/we are subject to withholding because I/we were notified that we are subject to withholding as the
- I/we are not subject to withholding because I/we were not notified that we are subject to withholding as the result of a failure to report all dividends or interest, or because the IRS has notified me that I am no longer subject to backup withholding. By signing below, I/we understand that in order to participate in the PACE program; I will be required to become a member of Opportunities Credit Union and/or an associate member of Opportunities Inc. (Opportunities Credit Union’s community development non-profit partner).

Authorized signers for my/our member base share account are as follows:

List Name(s) of Member Share Account Owner(s)	Signature(s) of Member Share Account Owner(s)	Date Signed
➤	➤	➤
➤	➤	➤

**INSTRUCTIONS for applying for the PACE Program by mail:**

- 1) Complete the PACE Application. Sign and date all areas indicated by arrows.
- 2) Include copies of the following documents:
  - One valid form of ID (A clear photocopy of a valid, unexpired government issued picture ID such as a Driver’s License or Passport) for each PACE applicant/authorized account signer.
  - Your most recent Property Tax Assessment, Latest Mortgage Statement, Warranty Deed and Current Homeowner’s Insurance Declaration Page.
  - The PACE Annual Cash Flow Analysis of Energy Improvements (from Efficiency Vermont) A check payable to “Opportunities Credit Union” (unless you have elected ACH/Electronic Authorization)
- 3) Mail in (or drop off) your completed application along with the above documents to:
 

Opportunities Credit Union  
ATTN: PACE Program  
P.O. Box 67, 25 Winooski Falls Way, Suite 203  
Winooski, VT 05404

NOTE: For questions regarding your PACE application or account opening paperwork please contact us at 802-865-2003 or 1-800-865-8328, (Extension 130 – Diane Labelle) or email us at [PACE@oppvt.org](mailto:PACE@oppvt.org).