

Pentagon Federal Credit Union
BOAT LOAN APPLICATION SUPPLEMENT

File No. _____

Member's Name _____

Application No. _____

BOAT INFORMATION: Boat is: NEW USED Coll. No. _____

If length is 25 ft., and/or weight is 3 tons (6000 lbs), water craft is considered a vessel. Please refer to Collateral Control for titling documentation procedures prior to approving loan.

Year _____ Manufacturer _____ Model _____

Model Number _____ Serial Number _____

Length (Ft.) _____ Weight (net tons) _____ Name of Boat (used boats only) _____
2000 lbs = 1 ton

Title if required by state _____

MOTOR INFORMATION: Motor is: NEW USED Coll. No. _____

Year _____ HP _____ Manufacturer _____ Serial No. _____

TRAILER INFORMATION: Trailer is: NEW USED Coll. No. _____

Year _____ Length (Ft.) _____ Manufacturer _____ Serial No. _____

PURCHASE INFORMATION

Purchase Price \$ _____ Down Payment \$ _____ To be Financed \$ _____

Seller's Name _____ Private Party Dealer/Broker

Address _____ City _____ State _____ Zip _____

If Dealer/Broker: Phone () _____ Is Boat lien-free? YES NO
(If dealer processes titling documents, PFCU lien must be recorded (Title, MSO, Registration - as pertinent.)

Name and address of Lienholder _____

Seller's acct no. with lienholder _____ Payoff Amt. \$ _____ Through ____/____/____

STORAGE/OWNERSHIP INFORMATION

Summer Docking Location _____ Fees (if any) \$ _____

Winter Docking Location _____ Fees (if any) \$ _____

(State) Authority where boat is to be titled and/or registered: _____

Name(s) to appear on Title/MSO/Registration: _____ Name of Boat _____
(Refer to Collateral Control for individual state requirements - ext. 1525/1419)

I agree to purchase full coverage hull insurance (with a deductible of no more than 2% of the market value of the boat) and to list PFCU as loss payee and send a copy of the insurance policy to PFCU.

NAME AND ADDRESS OF INSURER _____

_____ POLICY NUMBER _____

MEMBER'S SIGNATURE _____ DATE _____

CO-APPLICANT'S SIGNATURE _____ DATE _____

OFFICE USE ONLY

NADA Value \$ _____ Appraisal/Survey required (Y/N) _____ Date requested ____/____/____ Attached (Y/N) _____

If Vessel:
Doc. Co. Contacted (Y/N) _____ Date ____/____/____ Time _____ Person Contacted _____

Confirmation Received - Date ____/____/____ Phone or Facsimile? _____ Time _____ Cost Quote \$ _____

UCC Filed (Y/N) _____ State/County _____ Date Filed ____/____/____ Employee _____