

Southern Pine Electric Trust

OPERATION ROUND UP

2134 South Blvd. P.O. Box 528 Brewton, AL 36427

251-867-5415 TEL 251-867-5219 FAX

Dear Individual Applicant:

The mission of the Southern Pine Electric Trust is the accumulation and disbursement of funds for charitable purposes to organizations and individuals located within Southern Pine Electric's service territory. Such disbursements of funds shall be for needs related to food, shelter, clothing, health and education. This endeavor will reflect Southern Pine's goal of being a member-focused, efficient and community-involved cooperative.

Attached you will find an application for the Southern Pine Electric Trust grant program.

Please be certain that you fill the application out in its entirety and attach all documents that are requested that relate to your current situation. Do NOT send any documents/bills, letters, etc., that you want returned. We will NOT return any documents.

Attached to the back of the application is a Release of Liability and Hold Harmless Agreement. SIGNATURE BY THE APPLICANT AND NOTARIZATION BY A NOTARY PUBLIC IS REQUIRED FOR THE APPLICATION TO BE CONSIDERED. Notaries are available free of charge in all of our offices.

If you are requesting consideration for repairs to your home, include a signed quote from a contractor. This information is **REQUIRED**. Grants cannot be considered for rental property.

All applications will be reviewed and processed as soon as possible. The Trust Board meets on the second Thursday of every other month (January, March, May, July, September, November). Complete applications must be received by the last business day of the month prior to the meeting or they will not be presented to the Trust Board until the next meeting.

If for any reason the application is not filled out in its entirety, the application will be returned to the applicant to be completed. It is the applicant's responsibility to insure all applications are complete. Please be aware that if an application is returned to the applicant it may delay the processing of the application.

Should you have any questions, please feel free to contact us at your convenience.

Vince Johnson, President/CEO Southern Pine Electric Cooperative

The information in this statement is for the purpose of obtaining funding from the Southern Pine Electric Trust, on behalf of the undersigned. Each undersigned understands that the information herein is used to consider the request for funding, and each undersigned represents and warrants that the information provided is true and complete and that the Southern Pine Electric Trust may consider this statement as continuing to be true and correct until a written notice of a change is provided. The Southern Pine Electric Trust is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein.



Application for Individual and /or Family Incomplete applications will automatically be denied assistance.

PLEASE TYPE OR PRINT CLEARLY IN DARK INK

Date of Appli	cation:			
Amount of Re	equest:			
Name of App	licant:		Date of Birth	:
Southern Pine	e Electric Member /Acce	ount # (if applicable):		
Address: (Provide proof)	Physical Address and Mailing	g Address (if different from physical)		
	City	State Zip	County	
Name/Addres	ss/Telephone of Person of	completing form if not the ap	plicant:	
Name	Address			Telephone
If you cannot	t be contacted by phon	ne, your application will NO	T be considered.	
Home Phone:		Cell Phone:	Work Phone:	
Reason for Re	equesting Funds:			
		Southern Pine Electric Trust		
		e? Yes No		
	mbers of household, inc			
<u>Name</u>		Relationship	Age	<u>Employer</u>

				_ Phone:	
Addres	ss:				
Occupa	ation:		Relati	onship to Applicant:	
				_ Phone:	
Addres	ss:				
Occup	ation:		Relati	onship to Applicant:	
				_ Phone:	
Addres	ss:				
Occupa	ation:		Relati	onship to Applicant:	
	icant currently employed?				
Is spou	use currently employed?	Yes	No		
If not,	list last employer and empl	oyment date	es and please	explain why:	
Have y	you refused work in the last	twelve mor	nths? If yes, w	/hy:	
Gross :	MONTHLY earnings (inclu	ıde all empl	oved member	rs of the household) – <i>Provide pr</i>	oof
				Supervisor	
				Phone	
	of Employment				
Emplo	ver # 2			Supervisor	
				Phone	
				Salary/Wage	
	or 2proj			_ = = = = = = = = = = = = = = = = = = =	
Emplo	yment of Others in Househ	old – Name			
Emplo	yer # 1			Supervisor	
Addres	SS			Phone	
Dates	of Employment			Salary/Wage	
	yer # 2			Supervisor	
				Phone	
				Salary/Wage	
				Action, etc.) you have contacted	
Is indi	vidual or family receiving a	unv other for	m of assistan	ce or aid (donation, insurance, et	c.)?
	No			, , , , , , , , , , , , , , , , , , , ,	,
Do you	u have homeowners insuran	nce?			
A	ou eligible for Medicaid or N	Medicare?			

List below <u>and</u> atte	ach proof of expenses, debts, and liabilities to	application.
HOHania	MONTHLY EXPENSES	Φ.
HOUSING	Mortgage or Rent Payment	\$
	Food	\$
UTILITIES	Electricity	\$
	Gas in home	\$
	Telephone (include cell phone bills)	\$
	Water/Sewer/Trash Pick-up	\$
	Cable/Satellite TV	\$
	Internet Service	\$
	Other	\$
TRANSPORTATION	Automobile Payments	\$
	Gasoline	\$
	Tag/Tax	\$
INSURANCE	Medical/Dental/Vision	\$
	Life/Burial	\$
	Automobile	\$
	Homeowners/Rental	\$
CREDIT CARDS/	Tionico whers/ Rentar	Ψ
CHARGE ACCOUNTS (Specify)		¢
CHARGE ACCOUNTS (Specify)		Φ
		5
		\$
		\$
		\$
		\$
LOAN PAYMENTS (Specify)		\$
		 \$
		\$
		<u> </u>
REAL ESTATE TAXES (Specify)		\$
OTHER EXPENSES (Specify)		 \$
o men en e		\$
TOTAL MONTHLY EXPENSES		Ψ
TOTAL MONTHLY EXPENSES	•••••••••••••••••••••••••••••••••••••••	•••••••Ф
	DEBT AND LIABILITIES RTGAGE (list home loan, car loans, credit card Phone	Outstanding Balance \$
2. Lender Name, Address &	Phone	
3. Lender Name, Address &	Phone	<u> </u>
		\$
4. Lender Name, Address &	Phone	
- 		\$
5. Lender Name, Address &	Phone	\$
Debt # 1	s, Miscellaneous – include address) Attach a lis	\$
Debt # 3		\$

List below and attach proof of income and assets to application.

MONTHLY INCOME Total Gross Earnings for Household.....\$ Bonus, Tips & Commission.....\$______ Social Security Benefits.....\$ Farm Income\$ Dividends & Interest Real Estate Income Alimony Received\$ Child Support Received\$______ Food Stamps.....\$______ Other\$______ Other (Unemployment).....\$_____ TOTAL MONTHLY INCOME.....\$_____\$ **ASSETS** CASH ON HAND Bank Name _____ Acct.# ____ Balance Bank Name _____ Acct.# ____ Balance Acct.# Balance **CASH ON HAND** Bank Name _____ Acct.# ___ Balance **REAL ESTATE** (list all property you own, i.e. house, mobile home, acreage): Property #1 _____ Acct.# ____ Mkt. Value Property #2 Acct.# Mkt. Value Property #3 Acct.# Mkt. Value Please attach documentation of home ownership (Deed, Title) **OTHER ASSETS** (Personal property, vehicles, whole life insurance, retirement/pension/annuity) TOTAL ASSETS.....\$ The information contained in this statement is for the purpose of obtaining funding from the Southern Pine Electric Trust, on behalf of

the undersigned. Each undersigned understands that the information provided herein is used to consider the request for funding, and each undersigned represents and warrants that the information provided is true and complete and that the Southern Pine Electric Trust may consider this statement as continuing to be true and correct until a written notice of a change is provided. The Southern Pine Electric Trust is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein. The Southern Pine Electric Trust is hereby authorized to utilize applicants name/organization for promotional or communication purposes (ie.: annual reports, news/press releases, brochures, etc.).

Signature of Applicant	Date
Signature of Spouse/Co-Applicant	 Date

Mail completed application & related documents to: Southern Pine Electric Trust, P O Box 528, Brewton, Alabama 36427

<u>PERSONAL STATEMENT</u> Explain the circumstances surrounding your current situation, your request, and why you are unable to provide the needed items or services yourself.

Applicant's Signature:

STATE OF ALABAMA

RELEASE OF LIABILITY AND HOLD HARMLESS AGREEMENT

(Individual Form)

COUNTY OF ESCAMBIA

For and in consideration of the transfer of a thing of value to the undersigned, whether in the form of money, service or personal property conferred by Southern Pine Electric Cooperative, Inc. or the Southern Pine Electric Trust, the undersigned applicant, does hereby unconditionally RELEASE and forever DISCHARGE Southern Pine Electric Cooperative and Southern Pine Electric Trust, and each of their agents, servants, employees, successors and assigns, from and against any and all claims, demands, damages, actions, causes of action or suits of any kind or nature whatsoever, including all injuries, known and unknown, anticipated and unanticipated, both to person and property, which may result from such transfer. The undersigned further agrees to indemnify and hold harmless Southern Pine Electric Cooperative and the Trust, together with their respective agents, servants, employees, successors and assigns, from and against any such claims or liabilities as may be incurred by the undersigned and arising from any such transfer made by either entity.

The undersigned further warrants and acknowledges that no promise or inducement has been offered or made as a condition hereof and that this release and hold harmless agreement is executed without reliance upon any statement or representation made by Southern Pine Electric Cooperative or the Trust or any of their respective agents, servants or employees.

IN WITNESS WHEREOF, the undersigned by its duly authorized representative on this the	has hereunto caused this instrument to be executedday of
STATE OF ALABAMA COUNTY OF	Applicant's Signature
I,	, a Notary Public, in and for said County in
said State, hereby certify that	, whose name,
as above is signed to the foregoing instrument and w	who is known to me, acknowledged before me on this
day that, being informed of the contents of the	instruments, he/she, as such officer and with full
authority, executed the same voluntarily for and as the	he act of said individual.
Given under my hand and seal this	_day of
	Notary Public
	County, Alabama My Commission Expires:

You may have this notarized free of charge in any Southern Pine Electric Cooperative Office: Atmore, Brewton, Evergreen and Frisco City

Individual Application Checklist Provide all applicable documents listed below.

 Completed entire application
Physical and Mailing Address Telephone Number(s)
Date of Birth
 Personal Statement - letter explaining circumstances, reason for request, and use of funds
 Proof of address
 Proof of employment
 Proof of employment – other household members
 Proof of other forms of assistance
 Doctor's Letter of Disability
 Attach bids/estimates/quotes for requested assistance.
 Proof of Monthly Expenses (Copies of bills, receipts, etc.)
 Proof of Debts/Liabilities (Copies of notes payable/mortgage, credit card statements, etc.)
 Proof of Other Debt
 Proof of Monthly Income (Copies of 3 months of check stubs, Social Security benefits letter, unemployment benefits letter, proof of child support, etc.)
 Proof of Other Assets (Copies of insurance policies, retirement, pensions, etc.)
 Proof of cash on hand (Copy of bank statement)
 Proof of Real Estate (Copy of Deed or Title)
 Copy of last Federal Income Tax Form and W-2
 Amount requested
 Signed and dated application
 Signed and notarized Release of Liability and Hold Harmless Agreement (sign in front of a notary)