

APPLICATION FOR ALABAMA POWER MERCHANDISE FINANCING

| | | | | | |
|--|--|-------------------------------------|-------------------------|-----------------------------------|--|
| SECTION A - TELL US ABOUT YOURSELF (Please print in black ink, one character to a box.) | | | | | |
| Last Name | | First Name | | Middle Name | |
| Home Address Number and Street | | | | | Apt. No. |
| City | | State | Zip | How Long? | Own Rent |
| | | | | yrs. mos. | <input type="checkbox"/> <input type="checkbox"/> |
| Mailing Address (If different than Home Address) | | | City | State | Zip |
| Previous Address Number and Street (If less than 2 Years at current address) | | | | | Apt. No. |
| City | | State | Zip | How Long? | Are you currently in Bankruptcy? |
| | | | | yrs. mos. | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Home Phone Number | | Cell Phone | | Social Security Number | |
| () - () - () - () - () - () | | () - () - () - () - () - () | | - - - - - | |
| Email Address | | | | Date of Birth | |
| | | | | / / | |
| Name of Employer | | | | How Long? | |
| | | | | yrs. mos. | |
| Address of Employer | | | | | |
| City | | State | Zip | Business Phone | |
| | | | | () - () - () - () - () - () | |
| Job or Position | | | Driver's License Number | | |
| | | | State: # | | |
| Monthly "Take Home" Pay | | Amount and Source of Other Income* | | | |
| \$, - - - - - | | \$, - - - - - Source: - - - - - | | | |
| Name of Previous Employer (If less than 2 years with current employer) | | | | | How Long? |
| | | | | | yrs. mos. |
| Address of Previous Employer | | | | | |
| City | | State | Zip | | |
| Nearest Relative Not Living With You | | | Relationship | | |
| Relative Address | | | | | Apt. No. |
| City | | State | Zip | Phone Number | |
| | | | | () - () - () - () - () - () | |
| Name of Additional Contact | | | | Phone Number | |
| | | | | () - () - () - () - () - () | |
| Are you (1) a regular or reserve member of the Army, Navy, Marine Corps, Air Force, or Coast Guard either (i) serving on active duty under a call or order that does not specify a period of 30 days or less or (ii) serving on Active Guard and Reserve duty or (2) the member's spouse, child, or dependent? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | | | |

***ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WANT TO DISCLOSE SUCH INCOME AND DO NOT WANT IT TO BE CONSIDERED IN THE CREDIT DECISION.**

| | |
|--|-------|
| Merchandise To Be Financed: | |
| Address at which merchandise will be kept: | Cost: |
| | \$ |

By signing below I (1) certify that (a) the information given in this application is true and complete; and (b) if this application is signed by two applicants, we are applying for joint credit, and each of us will be responsible for the full amount owed at any time, and (2) authorize Alabama Power Company: (a) to check my credit and employment history to determine credit worthiness; (b) to report credit and payment history with Alabama Power to others; and (c) to send information and offers about Alabama Power's products and services to me at the email address shown above.

Applicant's Signature _____ Date _____

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|---|
| FOR APC USE ONLY |
| Telephone Application?: Yes No |
| CSS Acct #: _____ |
| Continuous Service Date: / / |
| Customer CSS Credit Score: _____ |
| Interconnect App # (last 6 digits): _____ |
| Interconnect Decision: _____ |

| SECTION B - YOUR JOINT APPLICANT (Please print in black ink, one character to a box.) | | | | | |
|--|------------------------------------|-------------|-------------------------|----------------------------------|--|
| Last Name | First Name | Middle Name | | | |
| Home Address Number and Street | | | | | Apt. No. |
| City | State | Zip | How Long? | Own | Rent |
| | | | yrs. | mos. | <input type="checkbox"/> <input type="checkbox"/> |
| Mailing Address (If different than Home Address) | | | City | State | Zip |
| Previous Address Number and Street (If less than 2 Years at current address) | | | | | Apt. No. |
| City | State | Zip | How Long? | Are you currently in Bankruptcy? | |
| | | | yrs. | mos. | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Home Phone Number | | Cell Phone | | Social Security Number | |
| () - | | () - | | - - | |
| Email Address | | | | Date of Birth | |
| | | | | / / | |
| Name of Employer | | | | How Long? | |
| | | | | yrs. mos. | |
| Address of Employer | | | | | |
| City | State | Zip | Business Phone | | |
| | | | () - | | |
| Job or Position | | | Driver's License Number | | |
| | | | State: # | | |
| Monthly "Take Home" Pay | Amount and Source of Other Income* | | | | |
| \$, | \$, Source: | | | | |
| Name of Previous Employer (If less than 2 years with current employer) | | | | | How Long? |
| | | | | | yrs. mos. |
| Address of Previous Employer | | | | | |
| City | State | Zip | | | |
| Nearest Relative Not Living With You | | | | Relationship | |
| | | | | | |
| Relative Address | | | | | Apt. No. |
| City | State | Zip | Phone Number | | |
| | | | () - | | |
| Name of Additional Contact | | | | Phone Number | |
| | | | | () - | |
| Are you (1) a regular or reserve member of the Army, Navy, Marine Corps, Air Force, or Coast Guard either (i) serving on active duty under a call or order that does not specify a period of 30 days or less or (ii) serving on Active Guard and Reserve duty or (2) the member's spouse, child, or dependent? | | | | | |
| YES <input type="checkbox"/> NO <input type="checkbox"/> | | | | | |

***ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WANT TO DISCLOSE SUCH INCOME AND DO NOT WANT IT TO BE CONSIDERED IN THE CREDIT DECISION.**

By signing below I (1) certify that (a) the information given in this application is true and complete; and (b) if this application is signed by two applicants, we are applying for joint credit, and each of us will be responsible for the full amount owed at any time, and (2) authorize Alabama Power Company: (a) to check my credit and employment history to determine credit worthiness; (b) to report credit and payment history with Alabama Power to others; and (c) to send information and offers about Alabama Power's products and services to me at the email address shown above.

Joint Applicant's Signature

Date

| |
|--|
| FOR APC USE ONLY |
| Telephone Application?: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| CSS Acct #: _____ |
| Continuous Service Date: ____/____/____ |
| Customer CSS Credit Score: _____ |
| Interconnect App # (last 6 digits): _____ |
| Interconnect Decision: _____ |