



**LOAN APPLICATION**  
**Southern Union Revolving Fund, Inc.**  
**P.O. Box 923868 Norcross, GA 30010-3868**  
**Ph. 770-408-1800 Fax: 770-408-1801**

**1. General Information**

Sponsoring Conference: \_\_\_\_\_ Date: \_\_\_\_\_  
 Borrowing Organization: \_\_\_\_\_  
 ANT # \_\_\_\_\_ E-Adventist.org Name: \_\_\_\_\_ Website: \_\_\_\_\_  
 Church Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Church's Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Person Receiving Statements: \_\_\_\_\_  
 Address: (if different from above) \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**2. Project Information**

Project Type:  Purchase  Construction  Renovation  
 Project Description: \_\_\_\_\_  
 Estimated Project Cost: \$ \_\_\_\_\_ Construction Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

**3. Loan Information**

Requested Amount: \$ \_\_\_\_\_ Term: \_\_\_\_\_  
 Terms as follows:  
     \*New purchases or new construction-maximum 240 months (20 years)  
     \*Renovations-maximum 180 months (15 years)

Is the land fully paid? <input type="checkbox"/> Yes <input type="checkbox"/> No	Balance Owed: \$ _____
Outstanding SURF Loans? <input type="checkbox"/> Yes <input type="checkbox"/> No Subaccount # _____	Balance Owed: \$ _____
Other Outstanding Loans? <input type="checkbox"/> Yes <input type="checkbox"/> No	Balance of Loans: \$ _____
Prior 3 Year Tithe Average: \$ _____	Total Membership: _____

**Church/School Officials Signatures**

\_\_\_\_\_  
 Pastor

\_\_\_\_\_  
 Head Elder

\_\_\_\_\_  
 Treasurer

\_\_\_\_\_  
 Church Clerk

**4. Plan of Finance**

**Source of Funds:**

**Estimated Project Costs:\*\***

(+)Land Value: \_\_\_\_\_  
(-)Balance Owed: \_\_\_\_\_  
(=) Equity (subtotal): \_\_\_\_\_  
Cash on hand for project: \_\_\_\_\_  
Conference Appropriation \_\_\_\_\_  
Subtotal \_\_\_\_\_  
SURF Loan\* \_\_\_\_\_  
Other \_\_\_\_\_  
Total Funds Available \_\_\_\_\_  
**\*Cannot be greater than 65% of project**

Land to be Purchased \_\_\_\_\_  
Architectural Fees \_\_\_\_\_  
Construction Costs \_\_\_\_\_  
Equipment Costs \_\_\_\_\_  
Bldg. Purchase Costs \_\_\_\_\_  
  
Total Estimated Costs \_\_\_\_\_  
**\*\*Must be less than or equal to total funds available**

**Conference Guarantor**

Signature \_\_\_\_\_  
Conference Treasurer

Print Name \_\_\_\_\_

Date of Committee Action: \_\_\_\_\_

Within NAD Working Policy?  Yes  No

Amount Authorized: \$ \_\_\_\_\_

**SURF Committee:**  Approved  Denied

Date: \_\_\_\_\_ Action # \_\_\_\_\_

Signature \_\_\_\_\_  
SURF Treasurer

Print Name \_\_\_\_\_