



2026 Natural Gas Home Equipment Loan

Side 2

| Eligible Equipment | Required Efficiency* | Point-of-Purchase Rebate |
|---------------------------------|--|--------------------------------------|
| Must be purchased new | As listed in AHRI or EnergyStar™* | Applied at local distributors |
| Hot Air Furnace | 95-96% AFUE 97%+ AFUE | \$250 \$400 |
| Hot Water Boiler | 90-94% AFUE 95%+ AFUE | \$500 \$600 |
| Combi Boiler / Water Heater | 90-94% AFUE 95%+ AFUE | \$600 \$800 |
| Direct Vent Space Heater | 80%+ AFUE | \$100 |
| Water Heater (40/50 gal) | .86+ UEF .82-.89 UEF | \$450 \$100 |
| Tankless Water Heater | .90-.94 UEF .95+ UEF | \$450 \$750 |
| Heat/Energy Recovery Ventilator | HVI Listed | \$400 |
| Drain Water Heat recovery | Call (802) 951-0321 | \$500 |
| Smart Thermostat | Go to EfficiencyVermont.com | \$100 |

* The AFUE (Annual Fuel Utilization Efficiency) of proposed new equipment can be found at ahridirectory.org or energystar.gov/products. The UEF (Uniform Energy Factor) for water heaters is the amount of hot water produced per unit of fuel consumed over a typical day. A higher AFUE or UEF indicates more efficient equipment. **Ask your contractor about qualifying equipment.**

VGS Equipment Rebate Terms and Conditions

Eligibility: Project must be installed at a Vermont residential home, owned and occupied by the borrower or borrower's tenant. Equipment must be purchased new and have an active listing on the AHRI or Energy Star list. Equipment must be installed by a Natural Gas Certified contractor and at a valid VGS account address. All Equipment must be installed to manufacturer's instructions and operated according to all applicable federal, state and local codes and ordinances. VGS has no responsibility for such compliance. Performance of installed equipment is not guaranteed expressly or implicitly. VGS reserves the right to verify the eligibility of the equipment installed. Customers must provide the Contractor's final invoice with rebate application to VGS for payment. Contractor's invoice must include size, make, model and serial number of the installed equipment. Incomplete applications, missing data, or ineligible equipment may result in the delay or disqualification of the rebate.

Loan limits: Maximum equipment loan amount is \$15,000, or as set by Green Mountain Credit Union.

Disclaimer of warranties and limitation of liability: Vermont Gas does not warrant the performance of installed equipment expressly or implicitly for fitness for a particular purpose nor does it warrant that the equipment or its installation complies with any specifications, laws, regulations, codes, or standards. Vermont Gas does not warrant or guarantee any estimation of cost saving provided to Borrower in a home energy audit. Any estimation of cost savings presented to Borrower is based on the figures Borrower provided to its auditor. Borrower's contract for installation is with its selected contractor alone and VGS shall not be liable for any damages of any kind in connection with the installation, implementation, or use of the improvements.

Endorsement: VGS does not endorse any particular manufacturer's product or system design in providing this financing opportunity and only provides a list of products that are eligible for current State of Vermont rebates.

Terms: Loan offer is subject to approval and available funding as determined by VGS's lending partner, Green Mountain Credit Union. All loan terms are subject to change without prior notice.



1250 Shelburne Road
South Burlington, VT 05403

(802) 864-6892 • (800) 360-6892
Fax: (802) 660-9692
www.greenmountaincu.com

APPLICATION

There are costs associated with the use of a credit card. Information about costs, rates, and fees may be contained in disclosures provided with this application or by calling us toll-free or collect at (800) 360-6892 or writing to us at the address stated on this application.

Check below to indicate the type of credit for which you are applying. Married Applicants may apply for a separate account.

Individual Credit: You must complete the Applicant section about yourself and the Other section about your spouse if

1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI)
2. your spouse will use the account, or
3. you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance, complete the Other section to the extent possible about the person on whose payments you are relying.

Joint Credit: Each Applicant must **individually** complete appropriate section below. If Co-Applicant is spouse of the Applicant, mark the Co-Applicant box.

Account/Loan: Individual Joint

Credit Card Account: Individual Joint

If this is an application for joint credit, Applicant and Co-Applicant each agree and acknowledge the intent to apply for joint credit (sign below):

| | |
|---------------------|------|
| Applicant Signature | Date |
| X | |
| (Seal) | |

| | |
|------------------------|------|
| Co-Applicant Signature | Date |
| X | |
| (Seal) | |

Amount Requested \$

Purpose/Collateral:

Credit Limit Requested \$

If Authorized User, Name:

PAYMENT PROTECTION Are you interested in having your loan protected? YES NO

If you answer "yes", the credit union will disclose the cost to protect your loan. The protection is voluntary and does not affect your loan approval. In order for your loan to be covered, you will need to sign a separate application that explains the terms and conditions.

APPLICANT

| | | | |
|--|---|---|---------------------|
| NAME (Last - First - Initial) | | OTHER <input type="checkbox"/> CO-APPLICANT <input type="checkbox"/> SPOUSE <input type="checkbox"/> GUARANTOR <input type="checkbox"/> OTHER | |
| | | NAME (Last - First - Initial) | |
| ACCOUNT NUMBER | SOCIAL SECURITY NUMBER/INDIVIDUAL TAX ID NUMBER | | |
| BIRTH DATE | EMAIL ADDRESS | | |
| HOME PHONE | CELL PHONE | BUSINESS PHONE/EXT. | HOME PHONE |
| DRIVER'S LICENSE NUMBER/STATE | AGES OF DEPENDENTS | | |
| PRESENT ADDRESS (Street - City - State - Zip) | | <input type="checkbox"/> OWN <input type="checkbox"/> RENT | LENGTH AT RESIDENCE |
| PREVIOUS ADDRESS (Street - City - State - Zip) | | <input type="checkbox"/> OWN <input type="checkbox"/> RENT | LENGTH AT RESIDENCE |
| MORTGAGE/RENT OWED TO | | | |
| MORTGAGE BALANCE \$ | MONTHLY PAYMENT \$ | INTEREST RATE % | MORTGAGE BALANCE \$ |

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:

MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)

EMPLOYMENT/INCOME

| | | | |
|---|---------------------|--|---------------------|
| EMPLOYMENT STATUS <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME HOURS PER WEEK | | EMPLOYMENT STATUS <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME HOURS PER WEEK | |
| START DATE: | | START DATE: | |
| NAME AND ADDRESS OF EMPLOYER | | | |
| NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED. | | | |
| EMPLOYMENT INCOME PER \$ | OTHER INCOME PER \$ | EMPLOYMENT INCOME PER \$ | OTHER INCOME PER \$ |
| TITLE/GRADE | | TITLE/GRADE | |
| SOURCE | | SOURCE | |
| PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN TWO YEARS | | | |
| STARTING DATE | | ENDING DATE | |
| STARTING DATE | | ENDING DATE | |
| MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE | | MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE | |
| ENDING/SEPARATION DATE <input type="checkbox"/> | | ENDING/SEPARATION DATE <input type="checkbox"/> | |

| | | | | | | | |
|--|---|--|---------------|--|-----------------------------|----------------------------|--------------------------|
| REFERENCE NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU | | REFERENCE NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU | | | | | |
| RELATIONSHIP | | HOME PHONE | | RELATIONSHIP | | HOME PHONE | |
| WHAT YOU OWE | | | | | | | |
| DEBT | CREDITOR NAME OTHER THAN THIS CREDIT UNION (Attach additional sheet(s) if necessary) | | INTEREST RATE | PRESENT BALANCE | MONTHLY PAYMENT | OWED BY APPLICANT OTHER | |
| <input type="checkbox"/> RENT | | | % | \$ | \$ | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> FIRST MORTGAGE (Incl. Tax & Ins.) | | | % | \$ | \$ | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | % | \$ | \$ | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | % | \$ | \$ | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | % | \$ | \$ | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | % | \$ | \$ | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | % | \$ | \$ | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | % | \$ | \$ | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | % | \$ | \$ | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | % | \$ | \$ | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | % | \$ | \$ | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | % | \$ | \$ | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | % | \$ | \$ | <input type="checkbox"/> | <input type="checkbox"/> |
| LIST ANY NAMES UNDER WHICH YOUR CREDIT REFERENCES AND CREDIT HISTORY CAN BE CHECKED: | | TOTALS | | \$ | \$ | | |
| WHAT YOU OWN | | | | | | | |
| ASSET DESCRIPTION | LIST LOCATION OF PROPERTY OR FINANCIAL INSTITUTION | | MARKET VALUE | PLEDGED AS COLLATERAL FOR ANOTHER LOAN | OWNED BY APPLICANT OTHER | | |
| | | | \$ | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | \$ | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | \$ | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | \$ | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | \$ | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | \$ | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | \$ | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> | <input type="checkbox"/> | |
| OTHER INFORMATION ABOUT YOU | | IF YOU ANSWER "YES" (BY CHECKING THE BOX) TO ANY QUESTION OTHER THAN #1, EXPLAIN ON AN ATTACHED SHEET | | | APPLICANT | OTHER | |
| 1. ARE YOU A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN? | | | | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. DO YOU CURRENTLY HAVE ANY OUTSTANDING JUDGMENTS OR HAVE YOU EVER FILED FOR BANKRUPTCY, HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13, HAD PROPERTY FORECLOSED UPON OR REPOSSESSED IN THE LAST SEVEN YEARS, OR BEEN A PARTY IN A LAWSUIT? | | | | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS? | | | | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE? FOR WHOM (Name of Others Obligated on Loan): TO WHOM (Name of Creditor): | | | | | <input type="checkbox"/> | <input type="checkbox"/> | |
| STATE LAW NOTICE(S) | | | | | | | |
| Notice to Nebraska Residents: A credit agreement must be in writing to be enforceable under Nebraska law. To protect you and us from any misunderstandings or disappointments, any contract, promise, undertaking, or offer to forebear repayment of money or to make any other financial accommodation in connection with this loan of money or grant or extension of credit, or any amendment of, cancellation of, waiver of, or substitution for any or all of the terms or provisions of any instrument or document executed in connection with this loan of money or grant or extension of credit, must be in writing to be effective. | | | | | | | |
| Notice to New York Residents: New York residents may contact the New York State Department of Financial Services to obtain a comparative listing of credit card rates, fees, and grace periods. New York State Department of Financial Services: 1-800-342-3736 or www.dfs.ny.gov . | | | | | | | |
| Notice to Ohio Residents: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law. | | | | | | | |
| Notice to Wisconsin Residents: (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened. (2) Please sign if you are not applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned. | | | | | | | |
| Signature for Wisconsin Residents Only | | Date | | | | | |
| X | | (Seal) | | | | | |

CREDIT CARD CONSENSUAL SECURITY INTEREST

You grant us a security interest in all individual and joint share and/or deposit accounts you have with us now and in the future to secure your credit card account. Shares and deposits in an IRA or any other account that would lose special tax treatment under state or federal law if given as security are not subject to the security interest you have given in your shares and deposits. You may withdraw these other shares unless you are in default. When you are in default, you authorize us to apply the balance in these accounts to any amounts due. For example, if you have an unpaid credit card balance, you agree we may use funds in your account(s) to pay any or all of the unpaid balance.

By signing or otherwise authenticating below, you are affirmatively agreeing that you are aware that granting a security interest is a condition for the credit card and you intend to grant a security interest.

| | |
|--|------|
| Consensual Security Interest Acknowledgement and Agreement | Date |
| X | |
| (Seal) | |

| | |
|--|------|
| Consensual Security Interest Acknowledgement and Agreement | Date |
| X | |
| (Seal) | |

SIGNATURES

By signing or otherwise authenticating below:

1. You promise that everything you have stated in this application is correct to the best of your knowledge, and that the above information is a complete listing of what you owe. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension, or collection of the credit received and for other accounts, products, or services we may offer you or for which you may qualify. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a crime to willfully and deliberately provide incomplete or incorrect information in this application.
2. If you are applying for a credit card, you understand that the use of your card will constitute acknowledgment of receipt and agreement to the terms of the Consumer Credit Card Agreement and Disclosure.

| | |
|-----------------------|------|
| Applicant's Signature | Date |
| X | |
| (Seal) | |

| | |
|-----------------|------|
| Other Signature | Date |
| X | |
| (Seal) | |

CREDIT UNION USE ONLY

| | | | | | |
|------|--|----------------------------|----------------|-------------|-------|
| DATE | <input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED (Adverse Action Notice Sent) | APPROVED LIMITS: SIGNATURE | LINE OF CREDIT | CREDIT CARD | OTHER |
| | | \$ | \$ | \$ | \$ |
| | | DEBT RATIO/SCORE: BEFORE | AFTER | | |

LOAN OFFICER COMMENTS:

| | |
|---|------|
| Credit Committee or Loan Officer Signatures | Date |
| X | |
| (Seal) | |

| | |
|---|------|
| Credit Committee or Loan Officer Signatures | Date |
| X | |
| (Seal) | |