



**Contractor Application Form**

Name: \_\_\_\_\_

SSN: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_

Cell: \_\_\_\_\_

\_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Tax ID: \_\_\_\_\_

Business Type \_\_\_\_\_  
(LLC, Sole proprietorship, etc.)

Years of Experience \_\_\_\_\_  
Specialty \_\_\_\_\_

Name(s) of Owners \_\_\_\_\_

Business License # \_\_\_\_\_ Residential Endorsement? YES NO

Do you have

Insurance? YES NO

Name of Insurance Carrier \_\_\_\_\_

Are you bonded? YES NO

**Job History**

Dates	Employer	Primary Responsibilities

Have you ever been involved in litigation as a result of work you have done? YES NO

If YES please explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



References

Name or Company Name:
Address:
City/State/Zip:
Phone Number:
Type of Reference: (personal or business)

Name or Company Name:
Address:
City/State/Zip:
Phone Number:
Type of Reference: (personal or business)

Name or Company Name:
Address:
City/State/Zip:
Phone Number:
Type of Reference: (personal or business)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spirit of Alaska FCU-Name

\_\_\_\_\_  
Approval/Decline      Date

**Please provide copies of licenses and bonding**

1417 GILLAM WAY, FAIRBANKS AK 99701 | 907-459-5974 | 800-478-1949 | FAX: 907-459-5980

SPIRIT OF ALASKA

FEDERAL CREDIT UNION

REAL ESTATE LOANS



To Whom it May Concern:

We would be happy to include you on our approved contractors list. Please fill out the attached contractor application form.

Once approved you will be notified and included.

There are several ways to return the paperwork. You can fax, email [homeloans@spiritofak.com](mailto:homeloans@spiritofak.com) or drop it off at the Gillam branch.

Thank you,

Jane Russo  
Property Specialist NMLS #1031391  
Spirit of Alaska FCU  
Ph.: (907) 459-5905  
Fax: (907) 459-5980

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