

LOAN APPLICATION

❖ BUSINESS INFORMATION:

Legal Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Contact: _____ Email: _____

Phone: _____ Fax: _____ Cell: _____

Structure: Sole Proprietorship General Partnership
 Limited Partnership Corporation (Please specify: S Corp, C Corp, LLC)

Date Established: _____ Date Incorporated: _____ State of Incorporation _____

of Employees: Existing: _____ After this financing: _____ Affiliates: _____

Employer Tax ID: _____ Website: _____

Name & Address of Current Bank: _____

Name of Franchise (if applicable) _____

Proposed Property (if different from current business address):

Address: _____

City: _____ State: _____ Zip: _____

❖ ESTIMATED PROJECT COSTS

Land Purchase \$ _____

Real Estate Purchase/New Building Construction \$ _____

Construction Contingency/Overruns \$ _____

Leasehold Improvements/Repairs \$ _____

Interim Interest \$ _____

Equipment Purchase \$ _____

Working Capital (including Accounts Payable & Inventory) \$ _____

Business Acquisition \$ _____

Refinance Debt \$ _____

SBA Guarantee Fee \$ _____

Other: _____ \$ _____

TOTAL ESTIMATED PROJECT AMOUNT \$ _____

CASH TO BE INJECTED BY BORROWER \$ _____

LOAN AMOUNT REQUESTED \$ _____

LOAN APPLICATION

❖ **LOAN HISTORY** List any previous or existing SBA or other Federal Government Debt.

Name of Agency	Original Amount of Loan	Date of Loan	Balance	Current or Past Due

❖ **OWNERSHIP INTERESTS & AFFILIATES** List the owners, partners, officers and of the business. 100% ownership must be shown.

Name	Title	% Ownership

List all business concerns in which the applicant company or any of the individuals listed above have any ownership.

Name	Title	% Ownership

❖ **ADDITIONAL INFORMATION** (For any affirmative response please attach an explanation)

- Have you or any officer of your company ever been involved in bankruptcy or insolvency proceedings? Yes No
- Are you or your business involved in any pending lawsuits?
- Does any applicant or their spouse or any member of their household or anyone who owns, manages or directs your business or their spouses or members of their households, work for the Small Business Administration, Small Business Advisory Council, SCORE or ACE, any Federal Agency, or the participating lender? Yes No
- Does your business presently, or will it as a result of this loan, engage in export trade? Yes No
- Does the company or any owner own title to a patented, trademarked or copyrighted product? Yes No
- Does the company maintain Life Insurance on any owner or officer? Yes No

Insured _____ Beneficiary _____ Amount \$ _____

Insured _____ Beneficiary _____ Amount \$ _____

❖ **APPLICATION PREPARATION** List the name and occupation of anyone who assisted in the preparation of this form.

Name _____ Occupation _____ Fee Paid \$ _____

By signing below, you certify the information you've given with this Application is true and complete. You authorize us to verify your statements with any source and obtain credit and employment history (including your spouse's if you live in a community property state.)

Date _____ Signature _____

Title _____ Name (Printed) _____

❖ **PACKAGING FEES & SERVICES NOTICE** A participating lender ("Lender") may charge Applicant reasonable fees for packaging services that are customary. Applicant is not required to obtain or pay for these services if they are unwanted.

MANAGEMENT RESUME

Your Name:

First	Middle/Maiden	Last
Social Security Number	Date of Birth	Place of Birth

U.S. Citizenship Status:

Yes No If no, Alien Registration #: _____

Present Home Address:

From: _____ TO: _____

Immediate Past Address:

From: _____ TO: _____

Residence Phone #:

_____ **Business Phone #:** _____

Spouse's Name:

First	Middle/Maiden	Last
Social Security Number	Date of Birth	Place of Birth

Employment History (last 10 years):

To	Employer: _____	Location _____
	Duties: _____	
To	Employer: _____	Location _____
	Duties: _____	
To	Employer: _____	Location _____
	Duties: _____	
To	Employer: _____	Location _____
	Duties: _____	

Your Formal Education Consists Of:

High School: _____ Years: _____
College: _____ Degree: _____ Years: _____
Military History: Veteran: Branch: _____ Served: _____ to _____

Are you or any other owner responsible for alimony or child support payments? Yes No

If yes, please include owner's name, annual amount, and anticipated expiration:

I am aware that this information is used to determine my eligibility for a loan, and that, if my application is approved, you may contact these sources to update this information at any time.

Signature: _____ Date: _____
Applicant