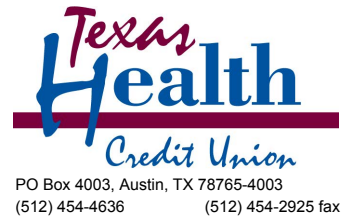


# BUSINESS LOAN APPLICATION



Each owner, shareholder, partner or member owning 20 percent or more interest in the business must sign a personal guaranty. A minimum of 1 guarantor is required regardless of percent ownership. Additional guarantees may be required.

## LOAN REQUEST

### Loan Amount:

Amount Requested: \$ \_\_\_\_\_

Term: \_\_\_\_\_  Months  Years

Purchase Price: \$ \_\_\_\_\_

(include copy of purchase order for equipment/vehicle purchases)

### Loan Type:

- Term Loan  
 Business Line of Credit  
 SBA Loan  
 Commercial Real Estate

### Additional Information:

- This request is to:  Refinance existing debt  Purchase new equipment  Manage seasonal cash flow shortages  Purchase existing business  
 Buy-out partner(s)  Acquire Real Estate  Letter of credit needs  Refinance commercial real estate  
 Other (describe): \_\_\_\_\_

## LOAN PURPOSE & COLLATERAL

What are loan proceeds going to be used for: \_\_\_\_\_

Collateral Available\*: \_\_\_\_\_

\*Loans will be secured by all business assets unless specific assets, acceptable to the Credit Union, are pledged. Please describe fully any such specific assets that you wish to use as \*collateral. Please note which assets, if any are pledged as collateral for other loans. Please note location of collateral if different than your business location.

## BUSINESS INFORMATION

Business Legal Name (exact legal name)

DBA (if applicable)

Taxpayer ID Number

Year Business Began Operation

Years Of Current Ownership

Years owners have been in this line of business

Annual Sales \$

Business Type:

- INDIVIDUAL  
 Sole Proprietorship  
 Individual

- PARTNERSHIP  
 General Partnership  
 Limited Partnership  
 Limited Liability Partnership

- CORPORATION  
 Sub-S Corporation  
 C-Corporation  
 Limited Liability Company

- OTHER  
 Nonprofit Organization  
 Professional Association  
 Other \_\_\_\_\_

Description of Business or Service

Primary Contact Name

Business Phone  
( )

Business Fax  
( )

## BUSINESS PHYSICAL LOCATION (cannot be a P.O. box):

Street Address

City

State

Zip

## BUSINESS MAILING ADDRESS (if different from above):

Street Address

City

State

Zip

## FINANCIAL INFORMATION

### Business Deposit Accounts

Financial Institution	Account Type	Current Balance	Average Balance	Would you like to move the deposit account?
		\$	\$	<input type="checkbox"/> Yes
		\$	\$	<input type="checkbox"/> Yes
		\$	\$	<input type="checkbox"/> Yes

### Business Debts (List all business debts, including accounts and payables. Include any existing outstanding credit union debt.)

Payable to:	Type of Account (Revolving, Term, etc.)	Balance Owning	Payment	Pay off with proceeds?
		\$	per	<input type="checkbox"/> Yes
		\$	per	<input type="checkbox"/> Yes
		\$	per	<input type="checkbox"/> Yes
		\$	per	<input type="checkbox"/> Yes

## RELATED BUSINESS ISSUES

(If Yes, please explain on separate sheet) DC 6 c

- Has the Business Applicant ever declared bankruptcy?  Yes  No If yes, Date of occurrence: \_\_\_\_\_  
 Has any Principal, Guarantor or Co-applicant ever declared bankruptcy?  Yes  No If yes, Date of occurrence: \_\_\_\_\_  
 Is the Business Applicant liable as guarantor or endorser on an existing or outstanding loan?  Yes  No If yes, Date of occurrence: \_\_\_\_\_  
 Is any Principal, Guarantor or Co-applicant liable as guarantor or endorser on an existing or outstanding loan?  Yes  No If yes, Date of occurrence: \_\_\_\_\_  
 Is the Business Applicant or any Principal, Guarantor or Co-Applicant a party to any legal claim or lawsuit?  Yes  No If yes, Date of occurrence: \_\_\_\_\_  
 Is the Business already pledging any assets for a loan or lease?  Yes  No If yes, Date of occurrence: \_\_\_\_\_  
 Is the Business Applicant or any Principal, Guarantor or Co-applicant currently past due on any taxes?  Yes  No If yes, Date of occurrence: \_\_\_\_\_  
 Are there any tax liens filed against the Business Applicant, or any Principal, Guarantor or Co-applicant?  Yes  No If yes, Date of occurrence: \_\_\_\_\_

Does Business Applicant own or lease occupied building?  Own  Lease

If leased, name of lessor: \_\_\_\_\_

Mailing address of lessor: \_\_\_\_\_

Years remaining on lease: \_\_\_\_\_

Monthly lease payments, if applicable: \$ \_\_\_\_\_

# BUSINESS LOAN APPLICATION - Continued

## OWNERSHIP / MANAGEMENT INFORMATION

List all owners of the company

Name	Social Security #	Title	Percent Ownership	Number of Years in This Line of Business	Payment

Principal, Guarantor, or Co-applicant information

Name	Position	Social Security Number
Address		
Home Phone	Cell Phone	Business Phone
		Email

Name	Position	Social Security Number
Address		
Home Phone	Cell Phone	Business Phone
		Email

Name	Position	Social Security Number
Address		
Home Phone	Cell Phone	Business Phone
		Email

Name	Position	Social Security Number
Address		
Home Phone	Cell Phone	Business Phone
		Email

**FINANCIAL STATEMENTS AND TAX RETURNS** Please provide a copy of the company's financial statements or tax returns for the last three years and interim financial statements for the current year. Please also provide guarantors' tax returns for the last three years and updated personal financial statements.

**Authorization:** Each Business Applicant and each person or entity signing this Application ("Signer") certifies that all information provided by the Business Applicant and the Signer is true and complete and authorizes CUBusiness Solutions L.L.C. (CUBS) and its agents to: obtain credit and employment information about the Business Applicant and Signer; obtain credit reports and make any inquiries CUBS and its agents consider appropriate in connection with this application or review of this loan account from time to time; make CUBS's experience with this loan account and information about this application available to credit bureaus, other Signers or other persons who have or expect to have financial dealings with the Business Applicant and the Signer; share collection information with Signer's other creditors; and disclose account information as required by law. Each Signer acknowledges that additional information may be required in order to make a final credit decision. Business Applicant also acknowledges receipt of the Equal Credit Disclosures provided with this application.

**REQUIRED SIGNERS:** All signers must also be duly authorized to sign on behalf of applicant.

**ACKNOWLEDGEMENT:** EACH SIGNER ACKNOWLEDGES THAT CUBUSINESS SOLUTIONS L.L.C. AND ITS AGENTS MAY RELY ON THE STATEMENTS AND INFORMATION SET FORTH IN THIS APPLICATION AND THAT SUCH STATEMENTS AND INFORMATION MAY BE INCORPORATED BY REFERENCE IN ANY AGREEMENT ANY OF THE UNDERSIGNED MAY ENTER INTO WITH CUBUSINESS SOLUTIONS L.L.C. EACH OF THE UNDERSIGNED HEREBY AGREES TO NOTIFY CUBUSINESS SOLUTIONS L.L.C. PROMPTLY OF ANY CHANGE IN ANY SUCH STATEMENT OR INFORMATION. EACH SIGNER HAS READ AND UNDERSTOOD THE TERMS OF THIS APPLICATION, INCLUDING ANY ADDENDUM, AND REPRESENTS AND WARRANTS THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

X	Signature	Print Name	Title	Date
X	Signature	Print Name	Title	Date
X	Signature	Print Name	Title	Date
X	Signature	Print Name	Title	Date

### Application Checklist – Thank you for choosing CUBusiness Solutions, LLC

We look forward to serving your financial needs.

- Completed Business Loan Application
- Personal Financial Statement for each business owner with interest in excess of 20%
- Last two years Personal Tax Returns for each business owner with interest in excess of 20%
- Last two years Business Tax Returns (3 years if request is over \$250,000)
- Last two years fiscal year-end Financial Statements (3 years if request is over \$250,000)
- Latest interim financial statement (must be within 90 days of application date)
- Schedule of all Business Debts
- Invoices or Purchase Orders of equipment to be financed
- Accounts Receivable and Payable Agings for Revolving Credit Line requests
- Description of Real Estate (legal and property type) for Real Estate secured requests