

APPLICATION FOR BUSINESS LOAN

PERSONAL APPLICANT: (Principal/Guarantor primarily responsible for application) **Name:**

Work or Daytime Phone: **Residence or Evening Phone:** **Cell Phone:**

Address: **City:** **State:** **Zip:** **Email:**

APPLICANT COMPANY (Operating Entity)* Name: **Phone :**

* Generally, applicant is the company that will own the assets to be financed. In an asset acquisition, applicant is the company buying the assets, which may be an entity to be formed (ETBF). In a stock acquisition of an existing company, the company to be acquired is the applicant.

Street Address: **Website:**

City: **County:** **State:** **Zip:**

Type of Business (products/services; main revenue source): **Date Established:**

Operating Entity: C-Corporation S-Corporation Partnership LLC Sole Proprietorship

Number of Employees: **Existing:** **If Loan is Approved:** **Date Established:**

PASSIVE COMPANY (Real Estate or other Holding Entity) Name:

C-Corporation S-Corporation Partnership LLC Sole Proprietorship

Number of Employees: **If Loan is Approved:** **Date Established:**

Phone/Contact Information (if different from operating co):

CONTACTS & REFERENCES (For principal owner(s); trade references if applicant is an existing business)

Banker Name/Institution: **Phone:** **Email:**

Accountant Name/Company: **Phone:** **Email:**

Attorney Name/Firm: **Phone:** **Email:**

Broker/Advisor: **Phone:** **Email:**

Trade Reference: **Phone:** **Email:**

Trade Reference: **Phone:** **Email:**

OWNERSHIP of Applicant Company: List below all officers, directors, partners, owners & co-owners, and **all** stockholders or record. All (100%) stock ownership must be shown (as it will be after this transaction is completed). Attach a resume for **each** person listed below and a personal financial statement if ownership is over 15%.

NAME	TITLE	% OF OWNERSHIP	ANNUAL COMPENSATION
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AFFILIATES – List below **all** business concerns in which the applicant company or **any** of the individuals listed in the ownership section above have 20% or greater interest, or a controlling interest (even if less than 20%). Attach additional sheets, if needed.

AFFILIATE COMPANY NAME	PRINCIPAL OWNER'S NAME (ENTITY OR INDIVIDUAL PRINCIPALS)	% OF OWNERSHIP	DATE ESTABLISHED
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Signature:

Date: