

BUSINESS LOAN APPLICATION

TO (LENDER)

Dated: _____ NOTICE TO APPLICANT: IF YOU ARE MARRIED YOU MAY APPLY FOR A SEPARATE ACCOUNT.

JOINT CREDIT. The applicants intend to apply for joint credit.
(Please initial) _____

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.
What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

APPLICANT INFORMATION

Name		Street Address	
City		State	Zip Code
Telephone Number		Tax I.D. Number	
Type of Business		Type of Organization <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Limited Liability Company ("LLC")	
State and County Where Organized		Date Business Entity Started Or Date of Birth, If Indiv. or Sole Prop.	

LIST: OWNERS, PARTNERS, MEMBERS, MANAGERS, OFFICERS, AS APPLICABLE

Name		Telephone Number	Social Security Number	
Street Address, City, State, Zip Code		Title	Age	% of Ownership
		<input type="checkbox"/> Personal Financial Statement Enclosed		<input type="checkbox"/> Personal Credit Report Enclosed
Name		Telephone Number	Social Security Number	
Street Address, City, State, Zip Code		Title	Age	% of Ownership
		<input type="checkbox"/> Personal Financial Statement Enclosed		<input type="checkbox"/> Personal Credit Report Enclosed
Name		Telephone Number	Social Security Number	
Street Address, City, State, Zip Code		Title	Age	% of Ownership
		<input type="checkbox"/> Personal Financial Statement Enclosed		<input type="checkbox"/> Personal Credit Report Enclosed
Name		Telephone Number	Social Security Number	
Street Address, City, State, Zip Code		Title	Age	% of Ownership
		<input type="checkbox"/> Personal Financial Statement Enclosed		<input type="checkbox"/> Personal Credit Report Enclosed

TYPE(S) OF LOAN(S) REQUESTED

A	Amount	Repayment Program
	\$	Purpose
B	Amount	Repayment Program
	\$	Purpose
C	Amount	Repayment Program
	\$	Purpose

BUSINESS FINANCIAL STATEMENT

ASSETS		LIABILITIES AND CAPITAL	Monthly Pymt	Balance
Cash on Hand and in Banks	\$	Notes Payable: Banks		\$
Listed Securities (Schedule A)		Notes Payable: Others		
Accounts and Notes Receivable:		Current Portion: Long Term Debt		
Accounts: Current		Accounts Payable		
Accounts: Past Due (Over 90 Days)		Dividends Payable		
Notes		Reserve for Federal Taxes		
TOTAL	\$	Accrued Expenses		
Less Reserve for Doubtful Accounts				
Inventory:				
Raw Materials				
Work in Process				
Finished Stock		Other		
Life Insurance: Cash Surrender Value		Loans on Life Insurance		
TOTAL CURRENT ASSETS	\$	TOTAL CURRENT LIABILITIES		\$
Land and Buildings (Schedule B):		Bonded Debt		
Land		Mortgages Payable		
Buildings		Long Term Debt		
Less Depreciation		Other		
Machinery and Equipment: \$				
Less Depreciation \$				
Receivables: Officers & Employees (Schedule C)				
Unlisted Securities (Schedule A)		TOTAL LIABILITIES		\$
Due from Subsidiaries & Affiliates (Schedule D)		Treasury Stock		
		Capital Stock: Common		
		Additional Capital Contributed		
		Retained Earnings		
Other				
		Net Worth (Proprietorship or Partnership)		
TOTAL ASSETS	\$	TOTAL LIABILITIES AND NET WORTH		\$
Are your books audited by a CPA? <input type="checkbox"/> Yes <input type="checkbox"/> No	Audited By	Date of Last Audit		
Inventories Above Are: <input type="checkbox"/> Actual <input type="checkbox"/> Estimated	Inventoried By	Date of Inventory		
Is this a sub chapter "S" Corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Rate of Depreciation Charged Against Buildings %	Rate of Depreciation Charged Against Machinery and Equipment %		
Are Any of Your Assets Pledged as Collateral for Loans, Advances or Other Liabilities? <input type="checkbox"/> Yes <input type="checkbox"/> No				
State Details (include description of property, name of creditor, original amount of credit, amount owing)				
PROFIT AND LOSS STATEMENT		RECONCILIATION OF SURPLUS OR NET WORTH		
FROM	TO	FROM	TO	
Net Sales for Period		Surplus or Net Worth on		
Less Cost of Goods Sold		Additions:		
Gross Profit		Net Profit for Period		
Expenses:				
Salaries: Officers				
Salaries: Employees				
Taxes (excl. Income Tax)		TOTAL ADDITIONS	\$	
Bad Debts		Deductions:		
Depreciation		Net Loss for Period		
Other Expenses		Cash Dividend Paid		
Net Profit or Loss from Operations		Stock Dividend Paid		
Other Income from Business				
Net Profit or Loss (Before Income Tax)				
Income Tax		TOTAL DEDUCTIONS	\$	
Net Profit or Loss	\$	Surplus or Net Worth on Statement	\$	

EXISTING RELATIONSHIP SUMMARY (\$000)

Customer Since:	Applicant	Related (Affiliate, Principals, etc.)	Total
Checking Account Balances			
Savings, Time and Certificate Balances			
General Loan Balance	Committed		
	Outstanding		
Installment Loan Balance	Committed		
	Outstanding		
Mortgage Loan Balances			
Open Letters of Credit			

ASSET SCHEDULES

SCHEDULE A - STOCKS AND BONDS

Name of Issuing Corporation and Type of Security	No. of Shares (If Stock) Face Value (If Bonds)	Registered in Name of	Market Value	Portion Pledged
Listed			\$	
Unlisted				

SCHEDULE B - LAND AND BUILDINGS

Description and Location	Owner of Record	Purchase Price	Present Value	Owing on Mortgage or Contract	Holder of Mortgage or Contract	Monthly Rent
		\$	\$	\$		\$

SCHEDULE C - RECEIVABLES DUE FROM OFFICERS AND EMPLOYEES

Name	Position	Amount	Original Date	Maturity	How Secured
		\$			
		\$			

SCHEDULE D - DUE FROM SUBSIDIARIES AND AFFILIATES

Name	Address	For Advances	Terms	For Merchandise	Terms
		\$		\$	
		\$		\$	

CONTINGENT LIABILITIES

Discounted Notes Receivable	\$	Notes Exchanged with Others	\$
Accommodation Paper		Actual or Threatened Litigation	
Endorsements for Others		As Guarantor or Bondsman	
Leases		Other Than Specified	

INSURANCE CARRIED

Plant and Equipment Insurance	\$	Life Insurance Payable To:	\$
Merchandise Insurance		Liability Insurance	
Use and Occupancy Insurance		Liability Insurance	

The information contained in this application is provided for the purpose of obtaining business (non-consumer) credit with the Lender on behalf of the undersigned. It is understood Lender will rely on the information provided in making its credit decision. The undersigned warrants and represents the information herein submitted is true and correct in all respects and Lender may consider this representation continuing until written notice to the contrary is received by the Lender from the undersigned. The Lender is authorized to make all inquiries it deems necessary to verify the accuracy of the statements herein made, or in its discretion, to further determine the undersigned's credit standing, or the credit standing of any general partner or LLC member/manager. The Lender is hereby authorized to answer any questions from third parties concerning the undersigned's experience with the Lender.

SIGNATURES

Name of Applicant _____

By _____ Date _____

By _____ Date _____

Its _____

By _____ Date _____

By _____ Date _____

Its _____

Its _____