

COMPANY INFORMATION						
Business Name Address City, State, Zip Business Industry Key Contact Tax ID Number	Email Address County Mobile Phone # Telephone Fax Date Established					
Please provide the following inform	ation:					
Number of employees at present t	me: After this loan:					
USE OF PROCEEDS						
Real Estate Acquisition Real Estate Improvements Real Estate Refinance Machinery & Equipment Acquisition Business Acquisition Working Capital / Cash Out Debt Refinance (other than Real E Total Financing Required Less Borrower's Down Pa Less Seller Carry Back Total Loan Requested	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$					
	OWNERSHIP AND MANAGEMENT					
Officer Title 1. 2. 3. 4.	Principal Ownership %	% % %				
	n, and there have been any ownership changes in the last six months, please pro					
Name Name If this person or persons owned 20 guaranty and further information re	Current Ownership % Previous Ownership Current Ownership % Previous Ownership Current Ownership % Previous Ownership Wor more of the company within the last six months, they may be required to proving garding their financial condition.	% % % de a				
,						
List below all business concerns in any ownership.	which the applicant or any of the individuals listed in the ownership section above h	nave				
Company Name	Owner % of Ownership					

		NAME VER	IFICATION	
	uting legal documents ar on all documents.	for your loan request. Please	TYPE or PRINT your company's le	egal name and your legal name
COMPANY NAM	E:			
STRUCTURE:	☐ Corporation	☐ Partnership	☐ Sole Proprietor	□ LLC
INDIVIDUALS:	_ се.ре.ае	ap	_ 00.0	
(First name)		(Middle Neme/Initial)	(Lost Nama)	
(First name)		(Middle Name/Initial)	(Last Name)	
(First Name)		(Middle Name/Initial)	(Last Name)	
(First name)		(Middle Name/Initial)	(Last Name)	
(First Name)		(Middle Name/Initial)	(Last Name)	
(First Name)		(Middle Name/Initial)	(Last Name)	
I certify to the be	est of my knowledge	that the information conta	ined herein is true and correct.	
Ву:			Date:	
		COLLATER	AL DETAIL	
Collateral being p	oledged for this loan:			
Lien position avai	ilability on collateral ple	equeq.		
Lien position avail	nability of collateral pi	ougeu.		
		RIISINESS SERVI	CES AND REFERENCES	
Name of your Co	omnony's CBA/Book		OLO AND REFERENCES	
Name of Firm:	ompany's CPA/Bookl	кеерег.		
Address:				_
Phone:				
Name of your Co	ompany's Attorney:			
Name of Firm:				
Address:				
Phone:				
Name of your Co	ompany's Commercia ker or Business Brok	al er:		
Name of Firm:	0. 240000 2.0	<u></u>		
Address:				
Phone:				
Name of your In Key Contact:	surance Company ar	nd		
Name of Firm:				
Address:				
Phone:				
necessary to e	effectively process	ou to contact any of the my loan request.	professionals listed above an	d to obtain any information
Borrower Signa	iture:		Date:	