

PART A – Borrower Information
SBA Loan Request Form

Contact Name _____ Telephone (____) _____

Company Information

Business Name _____ Telephone (____) _____

Address _____

City _____ County _____ State _____ ZIP _____

Type of Entity: Corporation Partnership Sole Proprietorship

Limited Liability Company/ Partnership Other _____

Type of Business _____ Date Established _____

Business Tax ID Number/Social Security Number _____

Existing Number of Employees _____ Projected Number of Employees _____

Accountant Name _____ Telephone (____) _____

Attorney Name _____ Telephone (____) _____

Bank of Business Name _____ Telephone (____) _____

Address _____ City _____ State/ZIP _____

Company Business History

Type of Business Construction Finance, Insurance, or Real Estate
 Manufacturing Retail Trade
 Transportation Service
 Wholesale Trade Other _____

Products/Services

Key Customers

Major Competitors

| Products/Services | Key Customers | Major Competitors |
|-------------------|---------------|-------------------|
| | | |
| | | |
| | | |
| | | |

Describe Company's Competitive Advantage:

Future Plans for Growth/Expansion:

Ownership/Management Information

Please list below all owners, corporate officers, directors and key managers of your company (ownership must total 100%).

PLEASE DO NOT LEAVE ANY BLANKS. PLEASE MARK ANY NON-APPLICABLE INFORMATION AS N/A.

Owner(s) _____ % of ownership _____
_____ % of ownership _____
_____ % of ownership _____
_____ % of ownership _____
_____ % of ownership _____
_____ % of ownership _____

President _____

Vice President(s) _____

Treasurer _____

Corporate Secretary _____

Board of Directors _____

Key Managers _____

Declarations of Owners, Principals and Directors

- 1. Is your business a franchise? [] Yes [] No
- 2. Have you or your business ever requested government financing? [] Yes [] No
- 3. Have you ever been or are you currently under indictment, on parole or probation? [] Yes [] No
- 4. Are you employed by the U.S. Government? [] Yes [] No
- 5. Have you ever been disbarred from doing business by the U.S. Government? [] Yes [] No
- 6. Are all of your business and personal taxes current? [] Yes [] No
- 7. Have you or any officer of your company ever been involved in bankruptcy or insolvency proceedings? If so please provide the details on a separate sheet. Please sign and date the information provided. [] Yes [] No
- 8. Are you or your business involved in any pending lawsuits? If so please provide the details on a separate sheet. Please sign and date the information provided. [] Yes [] No
- 9. Do you or your spouse or any member of your household, anyone who owns, manages, or directs your business or their spouses or members of their households work for the SBA, Small Business Advisory Council, SCORE, ACE, any Federal Agency or the participating lender? If so, please provide the name and address of the person and the office where employed. Please sign and date the information provided. [] Yes [] No
- 10. Does your business, its owners or majority stockholders own or have controlling interest in other businesses? If yes, please provide their names and the relationship with your company along with a current balance sheet and operating statement for each. Please sign and date the information provided. [] Yes [] No
- 11. Do you buy from, sell to, or use the services of any concern in which someone in your company has a significant financial interest? If yes, provide the details on a separate sheet. Please sign and date the information provided. [] Yes [] No
- 12. Does your company presently engage in Export Trade? [] Yes [] No
- 13. Will you be using proceeds from this loan to support your company's exports? [] Yes [] No
- 14. Would you like information on Exporting? [] Yes [] No

Affiliates Information

Please list all business concerns in which the applicant company or any of the individuals listed in the ownership section have any ownership. (Please use additional sheets, if necessary)

| Company Name | Owner (applicant company or individual) | % of Ownership | # of Employees | NAICS |
|--------------|---|----------------|----------------|-------|
|--------------|---|----------------|----------------|-------|

| | | | | |
|--|--|--|--|--|
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Each 20% or more Owner, each Director, Corporate Officer, Guarantor and Key Manager must submit the following form.

Borrower Name _____

Individual Name _____ SS#: _____

Personal Information:

Date of Birth _____ Place of Birth (City/State) _____ U.S. Citizen __Y__N If "No" are you a "Lawful Permanent Resident"? __Y__N If "No" give alien registration number _____

Current Address _____ Residence Telephone: _____

_____ From _____ To _____

Previous Address (if less than 10 years at current address) _____

_____ From _____ To _____

Spouse name _____ SS # _____

Education:

College/Technical Training- Name/Location

_____ Dates Attended: From _____ To _____ Major: _____ Degree/Certificate _____

_____ Dates Attended: From _____ To _____ Major: _____ Degree/Certificate _____

_____ Dates Attended: From _____ To _____ Major: _____ Degree/Certificate _____

Military Service:

Branch of Service _____ Dates of Service: From _____ To _____

Work Experience: List chronologically beginning with present employment.

Company Name/Location _____

From _____ To _____ Title/Position _____

Duties _____

Company Name/Location _____

From _____ To _____ Title/Position _____

Duties _____

Company Name/Location _____

From _____ To _____ Title/Position _____

Duties _____

Are you employed by the U.S. Government? Yes__ No__ Agency/Position _____

1. Are you presently under indictment, on parole, or probation? Yes__ No__ (If yes indicate date parole or probation is to expire.)
2. Have you ever been charged with or arrested for any criminal offense other than a minor motor vehicle violation? Include offenses which have been dismissed, discharged, or nolle prosequi. (All arrests and charges must be disclosed and explained on an attached sheet.) Yes
No
3. Have you ever been convicted, placed on pretrial diversion, or placed on any form of probation, including adjudication withheld pending probation, for any criminal offense other than a minor motor vehicle violation? Yes__ No

Signature: _____ Date: _____

Other SBA Loan Information

Have any of the company's current owners had an SBA loan or an interest in a company with an SBA loan?

Yes No

If yes, Name of Financial Institution _____

Original Loan Amount: \$ _____ Date of Application to SBA: _____

Current Loan Balance \$ _____ Current or Past Due: _____ Loan Account No. _____

Gender*: Male Female

Ethnic Background/Race*:

African American Hispanic Puerto Rican Asian, Pacific Islander

Native American (other than Eskimo or Aleut) White

Other _____

**NOTE: This information is collected for statistical purposes only and is necessary to document SBA fair lending practices. It has no bearing on the credit decision to approve or decline this application.*

Use of Loan Proceeds and Estimated Project Costs

Estimated project costs:

| | |
|-------------------------------------|----------|
| Real Estate Purchase* | \$ _____ |
| New Building Construction | \$ _____ |
| Improvements/Repairs | \$ _____ |
| Machinery/Equipment | \$ _____ |
| Furniture/Fixtures | \$ _____ |
| Inventory Purchase | \$ _____ |
| Business Acquisition Purchase Price | \$ _____ |
| Debt Refinancing | \$ _____ |
| Working Capital | \$ _____ |
| Other | \$ _____ |
| Total Amount | \$ _____ |

**If real estate purchase, under what name(s) do you wish to take title?*

Down payment (cash injection, gift, seller carry-back, etc.): \$ _____

Total Loan Amount Requested (project cost less down payment): \$ _____

Collateral to be provided for loan: _____

Credit Release Authorization

By signing below, I hereby certify to the following: 1) You may investigate my business or personal credit history; 2) I have completed this Loan Request Form; 3) the responses in this Loan Request Form and the information provided in addition to those responses are accurate and complete to the best of my knowledge; and the lender may rely on the accuracy thereof.

Signature _____ Title _____ Date _____

Signature _____ Title _____ Date _____

BUSINESS INDEBTEDNESS SCHEDULE

| Owed to (use * to indicate debt to be refinanced) | Original \$ | Original Date | Balance | Interest Rate | Maturity Date | Monthly Payment | Security | Status |
|---|-------------|---------------|---------|---------------|---------------|-----------------|----------|--------|
| Acct. # | | | | | | | | |
| Acct. # | | | | | | | | |
| Acct. # | | | | | | | | |
| Acct. # | | | | | | | | |
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| Acct. # | | | | | | | | |
| Acct. # | | | | | | | | |

* Represents debt to be refinanced.

MUST - Complete **all** information and dates. Security should state type of security (Real Estate, Assets, Equipment). Status should state "Current" or "Past Due".

Company Business Plan

Goals and objectives:

1. _____
2. _____
3. _____

Target market _____

Please describe your location (i.e., ease of access, location of competitors, etc.) _____

Market needs and business opportunity _____

Sales and marketing strategies _____

How this loan will assist your company _____

Business economics (i.e., pricing, gross/net margins, etc.) _____

Seasonal factors _____

Environmental Questionnaire (to be completed when commercial real estate is involved)

Property or Facility Location (attach legal description, if available): _____

Property size (lot size or acreage) _____

This property is: Owned Leased

Please complete the following questions in detail. If additional space is needed, attach separate sheets. If an answer to any question cannot be determined after reasonable investigation, so indicate.

1. **A.** List all current owners and occupants of the Property, their complete addresses, and how long they have owned or occupied the Property.

- B.** List the current owners and/or occupants prior, current, and planned use for the Property.

Prior Use: _____

Current Use: _____

Planned Use: _____

- C.** Does the planned use of the Property involve the handling, storage, use, or disposal of any hazardous substances or wastes? Yes No

If Yes, please explain in detail. _____

2. List each prior owner and occupant who owned or occupies the Property prior to those listed in response to question 1.A. above, and describe how long they owned or occupied the Property and detail how they put the Property to use (go back 60 years, if possible).

3. List the current owners/occupants and current use of all properties that are adjacent to the subject property.

4. **A.** Have any chemicals been used or stored on the Property within the last 5 years? Yes No

If Yes, what type? _____

- B.** Are there any containers or drums situated or buried on, in, or around the Property or any adjacent property?

Yes No

5. Are any asbestos-containing materials present on the Property? Yes No

If yes, what type? _____

6. Are there now, or have there ever been in the past, any underground storage tanks on or around the Property?

Yes No

If Yes, provide the age, number, ownership, use and condition of such tank(s), and whether the tank(s) are registered. If the tank(s) have been removed, please provide the date and under whose supervision the removal took place.

7. Have there ever been any spills or releases of oil, gasoline or other substances on, in, under, or about the Property?

Yes No

If Yes, please give details. _____

8. **A.** Are there currently any above ground waste piles? Yes No

If Yes, please explain the composition of the pile(s). _____

- B.** Has the Property, or any adjoining property, ever been used as a landfill or for solid waste disposal? Yes No

If Yes, please explain. _____

9. Is there any evidence of distressed vegetation or non-vegetation areas on the Property? Yes No

If Yes, please explain the condition of the vegetation and probable causes. _____

10. Does the Property have any discolored soils? Yes No

If Yes, please explain any known reasons for this occurrence. _____

11. **A.** Is there surface water on the Property (e.g. streams, ponds, etc.)? Yes No

- B.** Are there any oily films on any standing water? Yes No

If Yes, please explain this occurrence. _____

12. Are there any unusual odors on the Property? Yes No

If Yes, please explain any known reasons for this occurrence. _____

13. Are there any electrical transformers or capacitors on the Property that may cause PCB's? Yes No

14. **A.** Has the Property or any other property owned by you, or any property adjacent to the Property ever been (1) listed on any governmental list of actual or potential hazardous waste sites or (2) investigated by any governmental agency for possible environmental problems or non-compliance with environmental laws? Yes No

If Yes, please explain. _____

- B.** Have you or the Property, or any owner or occupant of the Property, ever been involved in litigation, disputes, complaints, claims, or regulatory actions involving environmental matters? Yes No

- C.** Has the Property ever received any notices of violations or citations from any local, state or federal regulatory agency? Yes No

- D.** Has the Property ever been involved in any environmental clean-up actions? Yes No

15. Have any of the following actions ever been taken relative to the Property?

- a.** Filing of an Emergency and Hazardous Chemical Form Yes No

- b.** Filing of a Toxic Chemical Release Form pursuant to the Federal emergency Planning and Community Right to Know Act. Yes No

If Yes, please attach a copy.

16. Does the current owner or occupant have all required environmental licenses or permits issued by governmental agencies?

Yes No

If Yes, are all permits and notifications displayed according to government regulations? Yes No

17. Has there ever been an environmental audit or risk assessment or other environmental study of the Property?

Yes No

If Yes, please attach a copy.

18. Are there any signs of contamination on the Property? Yes No

19. Have you or any enterprises with which you are or have been involved ever been identified as a potentially responsible party, or received any notices issued by any governmental agency concerning environmental contamination or the threat thereof at any location whatsoever? Yes No

If Yes, please document each such instance and its status. _____

Certificate

I/We acknowledge that I/We have read the Environmental Questionnaire in its entirety and, by signing below, I/We hereby certify the following: 1) I/We have completed the foregoing questionnaire are accurate and complete to the best of my/our knowledge, after inquiry; and 3) you may rely on the accuracy thereof.

Applicant: _____

By: _____

Name

Title

Date

By: _____

Name

Title

Date

Estimated Projection and Forecast of Two Year's Earnings

(Please Attach Assumptions)

| | 1 st Year Projections Dollar Estimates | 2 nd Year Projections |
|-----------------------|--|-------------------------------------|
| Gross Receipts | \$ | \$ |
| Merchandise Cost | \$ | \$ |
| Gross Profit | \$ | \$ |
| EXPENSES | | |
| Officers' Salaries | \$ | \$ |
| Employees' Wages | \$ | \$ |
| Accounting/Legal Fees | \$ | \$ |
| Advertising | \$ | \$ |
| Rent | \$ | \$ |
| Depreciation | \$ | \$ |
| Supplies | \$ | \$ |
| Electricity | \$ | \$ |
| Telephone | \$ | \$ |
| Interest | \$ | \$ |
| Repairs | \$ | \$ |
| Taxes | \$ | \$ |
| Insurance | \$ | \$ |
| Bad Debts | \$ | \$ |
| Miscellaneous | \$ | \$ |

(If Miscellaneous Expense is large, please itemize on a separate exhibit)

| | | |
|---|-----------|-----------|
| Other (explain) | \$ | \$ |
| | \$ | \$ |
| Total Expenses | \$ | \$ |
| Net Profit (before taxes) | \$ | \$ |
| Less Income Taxes | \$ | \$ |
| Net Profit (after taxes) | \$ | \$ |
| Less: Withdrawals (only if Proprietorship, Partnership, or S-Corp.) | \$ | \$ |
| Net Profit Remaining For Payments on Loan | \$ | \$ |

PERSONAL FINANCIAL STATEMENT

Please fill in all requested information to the best of your knowledge. References to the attached schedules are provided to detail specific types of personal financial information. All dollar and value amounts should be expressed in U.S. Dollars only.

SECTION 1 – INDIVIDUAL OR JOINT INFORMATION

| | |
|-------------------|---|
| Name(s) | Business Name |
| Residence Address | Business Address |
| City, State, Zip | City, State, Zip |
| Residence Phone | Business Phone |
| Title or Position | Type of Business (C-Corp, S-Corp, LLC, etc.) |

SECTION 2 – STATEMENT OF FINANCIAL CONDITION AS OF _____ Date

Personal Assets should be net of business value.

| ASSETS (Omit assets of doubtful value) | VALUE (Omit cents) | LIABILITIES | VALUE (Omit cents) |
|--|-----------------------|--|-----------------------|
| Cash | | Notes Payable to Banks – Secured | |
| IRA & Retirement Accounts | | Notes Payable to Banks - Unsecured | |
| US Govt. Marketable Securities (Schedule A) | | Due to Brokers | |
| Non-Marketable Securities Schedule A) | | Accounts Payable to Others – Secured | |
| Securities Held by Broker in Margin Accounts | | Accounts Payable to Others – Unsecured | |
| Restricted or Control Stocks | | Accounts & Bills Due | |
| Partial Interest in Real Estate (Schedule B) | | Real Estate Mortgages (Schedule B) | |
| Real Estate Owned (Schedule B) | | Unpaid Income Tax | |
| Loans Receivable | | Other Unpaid Taxes & Interest | |
| Personal Property (Automobiles, etc.) | | Other Debts: | |
| Cash Value of Life Insurance (Schedule C) | | | |
| Other Assets: | | | |
| | | | |
| | | TOTAL LIABILITIES | |
| | | NET WORTH | |
| TOTAL ASSETS | | TOTAL LIABILITIES & EQUITY | |

SECTION 2 – STATEMENT OF FINANCIAL CONDITION (continued)

| SOURCES OF INCOME | | PERSONAL INFORMATION |
|--|----|---|
| In US\$ | | |
| For the Year Ended (YYYY) | | Do you have a will? |
| Salary, Bonuses & Commissions | \$ | If so, please provide the name of the executor? |
| Dividends | \$ | Are you a partner or an officer in any other venture? |
| Real Income | \$ | If so, please provide details. |
| Other Income (Alimony, child support, or separate maintenance income need not be revealed if you do not want it to be considered as a basis for repaying this obligation.) | \$ | Are you obligated to pay alimony, child support or separate maintenance payments? If so, please provide details. |
| | \$ | |
| | \$ | |
| TOTAL INCOME | \$ | Are there any assets pledged other than as described on the schedules? If so, please provide details. |
| CONTINGENT LIABILITIES | | |
| In US\$ | | |
| Do you have any contingent liabilities? If so, please provide details. | | Your income taxes are settled through what year? |
| | | Are you a defendant in any suits or legal actions? |
| | | Name and address of where your personal bank accounts are carried: |
| As Endorser, Co-Maker or Guarantor? | \$ | |
| On Leases or Contracts? | \$ | |
| Legal Claims | \$ | Have you ever been declared bankrupt? |
| Other Special Debt | \$ | If so, please provide details. |
| Amount of Contested Income Tax Liens | \$ | |

SCHEDULE A – MARKETABLE & NON-MARKETABLE SECURITIES

| Number of Shares / Bond Face Value | Marketable or Non-Marketable | Description | In the Name of... | Are these Pledged? | Source of Value | Market Value |
|------------------------------------|------------------------------|-------------|-------------------|--------------------|-----------------|--------------|
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SCHEDULE B – REAL ESTATE

| Address | Residential or Commercial | Percent Ownership | Acquisition Date | Purchase Price | Estimated Market Value | Mortgage or Lien Balance | Total Monthly Payment |
|---------|---------------------------|-------------------|------------------|----------------|------------------------|--------------------------|-----------------------|
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SCHEDULE C – LIFE INSURANCE CARRIED (Including S.B.L.I. and group insurance)

| Name of Insurance Company | Owner of Policy | Beneficiary | Face Amount | Policy Value | Cash Surrender Value |
|---------------------------|-----------------|-------------|-------------|--------------|----------------------|
| | | | | | |
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SCHEDULE D – INSTITUTIONS WHERE CREDIT HAS BEEN OBTAINED

| Name & Address of Lender | Name of Borrower | Secured or Unsecured | Original Date | Original Balance | Current Balance | Monthly Payment |
|--------------------------|------------------|----------------------|---------------|------------------|-----------------|-----------------|
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For the purpose of procuring credit or any other financial accommodation from you from time to time, direct or contingent, the undersigned represents that the foregoing is a true and complete statement of the financial condition of the undersigned and of all facts herein set forth, and for such purpose agrees that you may at any time hereafter assume that the conditions and affairs of the undersigned have continued to be substantially as good as herein set forth and that there has been no change materially impairing the ability of the undersigned to pay all claims and demands against the undersigned unless, I/we notify you otherwise. The undersigned further agrees to notify you immediately in writing of any substantial change in the condition or affairs of the undersigned. You are authorized to make all inquiries you deem necessary to verify the accuracy of statements made herein and to determine the undersigned's creditworthiness.

Authorized Signature

Authorized Signature (If providing a joint personal financial statement)

Date Signed

Date Signed

Social Security Number _____
Date of Birth

Social Security Number _____
Date of Birth

For the purpose of procuring credit or any other financial accommodation from you from time to time, direct or contingent, the undersigned represents that the foregoing is a true and complete statement of the financial condition of the undersigned and of all facts herein set forth, and for such purpose agrees that you may at any time hereafter assume that the conditions and affairs of the undersigned have continued to be substantially as good as herein set forth and that there has been no change materially impairing the ability of the undersigned to pay all claims and demands against the undersigned unless, I/we notify you otherwise. The undersigned further agrees to notify you immediately in writing of any substantial change in the condition or affairs of the undersigned. You are authorized to make all inquiries you deem necessary to verify the accuracy of statements made herein and to determine the undersigned's creditworthiness.

Please print:

Name: _____ Name: _____

Address: _____ Address: _____

X _____
Authorized Signature

X _____
Authorized Signature

Date Signed

Date Signed

Social Security Number

Social Security Number

Date of Birth

Date of Birth

Business Name