

COMMERCIAL LOAN APPLICATION

CREDIT REQUESTED									
Amount Requested Term of Credit Requested	Loan Type	9		Credit Request	Applicant Only				
				[Joint With Co-Applicant(s)				
Market Survey Purpose of Credit Reques	st		App #	We intend to apply	y for joint credit:				
				Applicant	Co-Applicant				
COMPLETION INSTRUCTIONS FOR APP	LICANT								
Complete the Applicant information for the first Applicant. Mark the appropriate box to indicate whether the Applicant is applying as a Borrower, Guarantor, Cosigner, Grantor (of collateral), or Other for a different capacity. If the Applicant is a married individual, he or she may apply for individual credit. (Do Not complete Marital Status question below if application is for individual unsecured credit)									
APPLICANT INFORMATION:									
Applicant is a:									
Name of Applicant (Business Name or Last Name if Individual) Applicant First Name (If individual) SSN/TIN#									
Assumed Business Names (If Any)		Filing Date Fil		ing Locations	DBA Name				
				-					
Check Appropriate Box					Marital Status (If Individual				
If you are applying for individual credit and ar assets of another person as the basis for rep	e relying on	your own income o	r assets and	not the income or	Borrower)				
for marital status.	bayment of t	ne credit requeste	a, ao not con	ipiete the section	Married				
If you are applying for individual credit, but a maintenance or on the income or assets of	re relying on	income from alim	ony, child sup	oport, or separate	Unmarried				
requested, complete all sections to the exter	nt possible, p	providing information	on about the	person on whose					
alimony, support or maintenance payments of If you are applying for joint credit with another				ioint application.					
Street Address		City	ST		Phone Number				
Mailing Address		City	ST	Zip Code					
Principal Office Address (if not listed above)		City	ST	Zip Code					
State of Organization Applicant is: An Indivi	dual 🗌 A	Proprietorship	A Partner	ship 🗌 A Corpora	ation Non-Profit				
	ciation 🗌 A	• •	A Gov't E	· ·	——————————————————————————————————————				
SCHEDULE OF COLLATERAL OFFERED				,					
				Status for This					
Description	Value	Total Liens		olicant	Creditor Name				
		\$	Purchas Presen	se Money					
				lly Owned					
		\$	Purcha						
				liy Owned					
	L	-							
		\$	Purcha						
		¢		Mangu					
		\$	Purcha						
				,					
		\$	Durcho	se Money					
		Ψ							
	Pic	ase Use Adobe Reader fo	r Form filling						

Have Questions? Call Us! We Have Answers.

	DME STATEMENT SUMMARY						
Alimony, Child Support or Se	parate Maintenance income need not be	e revealed if you do not wi	sh to have it	considered	as a basis for repaying this		
obligation.							
Total Assets: \$ Total Liabilities: \$							
See Attached Finance	Net Worth: \$	Net Annual Cash Flow:	\$				
RELATIONSHIP INFOR	MATION - APPLICANT'S HISTO	RY WITH LENDER					
New Customer	Customer Since(MM-YYYY):						
Existing Customer							
		Last	Credit Bureau	J:			
Liabilities with Lender	Deposits with Le	Deposits with Lender			Total Credit With Lender		
Direct: \$	DDA Avg: \$		New Credit: \$				
Contingent: \$	Other Avg: \$		Proposed Total: \$				
Total: \$	Total Avg: <u></u> \$						
SIGNERS FOR THIS A	PPLICANT						
Name	Title			Authorized	SSN #		
Street Address	City		ST	Zip Code	Phone Number		
Name	Title			Authorized	SSN #		
Street Address	City		ST	Zip Code	Phone Number		
Name	Title			Authorized	SSN #		
Street Address	City		ST	Zip Code	Phone Number		
Name	Title			Authorized	SSN #		
Street Address	City		ST	Zip Code	Phone Number		
	Use Additio	nal Sheet If Necessary					
APPLICANT SIGNATU	RES						

I/We hereby apply for the loan or credit described in this application on behalf of the applicant business. I/We certify that I/we made no misrepresentation in this loan application or in any related documents, that all information is true and complete, and that I/we did not omit any important information. I/We agree that any property securing the loan or credit will not be used for any illegal or restricted purpose. Lender is authorized to verify with other parties and to make any investigation of my/our credit, either directly or through any agency employed by the Lender for that purpose. Lender may disclose to any other interested parties information as to Lender's experiences or transactions with my/our account. I/We understand that Lender will retain this application and any other credit information Lender receives, even if no loan or credit is granted. These representations and authorizations extend not only to Lender, but also to any insurer of the loan and to any investor to whom Lender may sell all or any part of the loan. I/We further authorize Lender to provide any such insurer or investor any information and documentation that they may request with respect to my/our application, credit or loan.

APPLICANT:

Ву:		Ву:						
Зу:		Ву:						
Use Additional Sheet If Necessary								
FOR LENDER'S USE ONLY								
Officer No. / Name	Approved By	Concurrence By (If Needed)	Committee Date	Decision Date				
Branch	Application Date	Application No.	Commitment No.	Loan No.				
Decision and Comments: Approved Denied Incomplete Counteroffer Conditional Approval Withdrawal Other:								