

LOAN REQUEST FORM

Company Information					
Company Name					
Address					
Street	City	Zip			
Business Phone Number () ()	Fax Number () ()	Company Web Site Address			
Date Business Established	Current Business Bank:				
Type of Ownership					
<input type="checkbox"/> Corporation <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> General Partnership					
Owner Information					
List below <u>all</u> owners, partners and stockholders.					
Name	Title	% Ownership			
Project Costs					
Real Estate Purchase	\$	Inventory	\$		
New Building Construction	\$	Working Capital	\$		
Building/Tenant Improvements	\$	Acquisition of Existing Business	\$		
Machinery / Equipment	\$	Debt Refinance (include copies of notes being paid off)	\$		
Furniture / Fixtures	\$	Closing Costs	\$		
Total Project Amount			\$		
Less Own Funds to be used in Project		Source: <input type="checkbox"/> Savings <input type="checkbox"/> Gift <input type="checkbox"/> Debt	\$ < >		
Less Other Funds to be used in Project		Identify Source:	\$ < >		
Loan Amount Being Requested			\$		
Previous SBA or other Government Financing					
Complete the following if you or any principal or affiliate have:					
1) ever requested Government Financing, or 2) are delinquent on the repayment of any Federal debt					
Name of Agency	Original Loan Amount	Date of Request	Approved or Declined	Current Balance	Current or Past Due
Affiliates					
List below all businesses in which either the applicant company or any of the individuals listed in the Owner Information section have any ownership.					
Company Name	Owner			% Ownership	
If Loan is for the Purchase of Commercial Real Estate					
Please identify how title will be vesting:					
What is your Escrow Deadline?:					
Name and Phone Number of Seller's Agent:					
Name and Phone Number of Buyer's Agent:					

BUSINESS HISTORY FORM

Background and History of Company

Nature of Business, Types of Products / Services

Customer Profile

List Key Customers

List Major Competitors

Marketing/Advertising What has been used and which were most successful?

Will the funding of this loan create new Employment Opportunities?

How will this loan benefit your company?

Number of Employees

Current ____ After Proposed Loan ____

FOR REAL ESTATE PURCHASE /REFINANCE LOAN REQUESTS

Purchase Price/Value: \$ _____

Loan Amount Requested: \$ _____

Rental Income: \$ _____

Taxes: \$ _____

Insurance: \$ _____

Utilities: \$ _____

Management Resume

Personal Information			
Name (First, Middle, Last)		Social Security Number	
Date of Birth	Place of Birth (City, State, Country)		
Residence Address		From: _____ To: ____	
Previous Residence Address <small>(omit if more than 10 years ago)</small>		From: _____ To: ____	
Spouse's Name (First, Middle, Last)		Spouse's Social Security Number	
Spouse's Date of Birth	Spouse's Place of Birth (City, State, Country)		
Educational Background			
Name of Institution	Dates Attended	Major	Degree Received
Name of Institution	Dates Attended	Major	Degree Received
Work Experience			
Company		Date Started	Date Ended
Address			
Description / Position			
Work Experience			
Company		Date Started	Date Ended
Address			
Description / Position			
Background Information <small>(Complete Spouse's information if they are a co-borrower or guarantor)</small>			
Borrower	Spouse		Are you a U.S. citizen? If no, please provide copy of Legal Permanent Resident card.
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		Prior Military Service? If yes: From _____ To _____ Honorable Discharge? _____
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>(If yes to any of the following questions, furnish details in a separate exhibit.)</i>			
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		Are you presently under indictment, on parole, or probation?
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		Have you ever been charged with or convicted of any criminal offense other than a misdemeanor involving a motor vehicle violation?
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		Are you involved in any lawsuit at this time or have you ever filed for personal or business Bankruptcy Protection?

PERSONAL FINANCIAL STATEMENT

U. S. SMALL BUSINESS ADMINISTRATION

As of _____, 1

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock or (4) any other person or entity providing a guaranty on the loan

Name Business Phone

Residence Address Residence Phone

City, State, & Zip Code

Business Name of Applicant/Borrower

ASSETS	LIABILITIES
(Omit Cents)	(Omit Cents)
Cash on hands & in Banks \$ _____	Accounts Payable \$ _____
Savings Accounts \$ _____	Notes Payable to Banks and Others \$ _____
IRA or Other Retirement Account \$ _____	(Describe in Section 2)
Accounts & Notes Receivable \$ _____	Installment Account (Auto) \$ _____
Life Insurance-Cash Surrender Value Only \$ _____	Mo. Payments \$ _____
(Complete Section 8)	Installment Account (other) \$ _____
Stocks and Bonds \$ _____	Mo. Payments \$ _____
(Describe in Section 3)	Loan on Life Insurance \$ _____
Real Estate \$ _____	Mortgages on Real Estate \$ _____
(Describe in Section 4)	(Describe in Section 4)
Automobile- Present Value \$ _____	Unpaid Taxes \$ _____
Other Personal Property \$ _____	(Describe in Section 6)
(Describe in Section 5)	Other Liabilities \$ _____
Other Assets \$ _____	(Describe in Section 7)
(Describe in Section 5)	Total Liabilities \$ _____
Total \$ _____	Net Worth \$ _____
	Total \$ _____

Section 1. Source of Income	Contingent Liabilities
Salary Including Distributions. \$ _____	As Endorser or Co-Maker \$ _____
Net Investment Income \$ _____	Legal Claims & Judgments \$ _____
Real Estate Income \$ _____	Provision for Federal Income Tax \$ _____
Other Income (Describe below)* \$ _____	Other Special Debt \$ _____

Description of Other Income in Section 1

Are any assets held in a Trust? Yes No If Yes, name of Trust: _____

*Alimony or child support payments need not be disclosed in "Other Income unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Bank and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

Section 3. Stocks and Bonds (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

Section 4. Real Estate Owned. (List each parcel separately. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment, and if delinquent, describe delinquency).

Section 6. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches).

Section 7. Other Liabilities (Describe in detail).

Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries).

I authorize SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

Signature: _____ **Date:** _____ **Social Security Number:** _____
X

Signature: _____ **Date:** _____ **Social Security Number:** _____
X

Please Note: The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have any questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance Office, Paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503.