



SBA BUSINESS LOAN APPLICATION

This checklist has been provided to assist you in gathering the necessary information for your business loan request. Forms are provided for items 1 - 7.

1. **Loan Request Form**
2. **Business History Form** (for a start-up business, please provide a full Business Plan)
3. **Authorization & Disclosure Form**
4. **Personal Financial Statement** Complete this form for each (1) proprietor, or (2) general partner, or (3) LLC member, limited partner or stockholder owning 20% or more of the company, or (4) any person providing a guaranty (spouses must sign and date)
5. **Management Resume** Provide for all individuals referred to in #4 above
6. **Request for Transcript of Tax Form**
7. **Business Debt Schedule** This schedule must be dated the same as the Interim Financial Statement requested in #10 below.

In addition, please provide the following items for applicant business and all affiliates

8. **Business Federal Tax Returns** – last three years, include all K-1 forms and schedules
9. **Business Financial Statements** – last three years, - CPA or Company-Prepared
10. **Interim Financial Statements** – dated within 45 days
11. **Accounts Receivable and Accounts Payable aging report** – dated same date as Interim Financial Statement
12. **Personal Tax Returns** – last three years, including all K-1 forms and schedules. For each individual referred to in #4 above.

If loan application is approved, the following information may also be required:

- i. Partnership Agreement
- ii. Articles of Incorporation and Corporate By-Laws/Articles of Organization and Operating Agreement
- iii. Current facility lease
- iv. Fictitious business name statement
- v. Business License
- vi. Projected Profit and Loss statement
- vii. Construction bid and plans
- viii. Bids/Purchase orders for Inventory, Furniture and Equipment that will be acquired with loan proceeds
- ix. Fire/Hazard/Liability insurance binder for all collateral securing loan
- x. Key-person life insurance policy to be pledged as collateral for loan
- xi. Franchise Offering Circular and Franchise Agreement
- xii. Purchase Agreement
- xiii. List of fixed assets – itemization should include details (description/serial number, year acquired, original cost, current market value, existing lien balance if any and name of lienholder if any) for those assets having an original value greater than \$5,000



LOAN REQUEST FORM

Company Information					
Company Name					
Address					
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 <u>all</u> owners, partners and stockholders – should add up to 100%					
Name	Title	E-mail Address	% 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 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 CLOSING DATE?:					
Name and Phone Number of Seller's Agent:					
Name and Phone Number of Buyer's Agent:					



**BANKING
RESOURCE
CENTER**
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
LOAN REQUESTS**

Your current square footage _____

New building's square footage _____

Will any space be leased out?

Yes No

If so, how many square feet and at what rate
_____ @ _____/sq.ft

AUTHORIZATION & DISCLOSURE FORM

Company Name: _____

1. I/we hereby authorize _____ Bank (Bank) to check my credit references. I/we authorize the Bank to provide credit information arising from this transaction to others as may be reasonably requested. I/we authorize the Bank to obtain one or more consumer credit reports on any of the undersigned from time to time, in connection with the application for credit and any subsequent financial products or services that the Bank may offer.
2. The information on pages of this application package is submitted for the purposes of inducing the Bank to extend credit and is a true, full and correct to the best of my/our knowledge. I/we acknowledge and agree that the Bank will rely upon the information provided on these forms and that intentionally false, incomplete or incorrect information may constitute fraud. While indebted to you, I/we agree to notify you immediately of any material change of my/our financial condition.
3. I/we hereby acknowledge that all loan approvals will be in writing and subject to the terms and conditions set forth in a commitment letter signed by an officer of Bank.
4. Bank reserves the right to issue press releases, advertisements, and other promotional materials describing any successful outcome of services provided on your behalf. The Borrower agrees that Bridge Bank shall have the right to identify the Borrower by name in those materials.
5. If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain a statement, please contact in writing Bridge Bank within 60 days from the date you are notified of our decision. We will send you a written statement of the reasons for the denial within 30 days of receiving your request for the statement.
NOTICE: The Federal Equal Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status or age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance programs; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the *Office of the Comptroller of the Currency,, Customer Assistance Unit, 1301 McKinney Avenue, Suite 3450, Houston, Texas 77010.*
6. You have a right under the law to receive a copy of any appraisal report we obtain in connection with your application for a loan to be secured by real property. If you wish to receive a copy, you must send your request in writing to: *Bank – SBA Lending Group, .* To be eligible to receive a copy of the appraisal, you must reimburse us for the expense we incurred in obtaining the report. We will advise you of the cost when we receive the request.
7. **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 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.

All owners, partners, guarantors and stockholders with 20% or more ownership interest must sign this form.

Signature

Title

Date

Signature

Title

Date

PERSONAL FINANCIAL STATEMENT

U. S. SMALL BUSINESS ADMINISTRATION

As of _____

Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant (including the assets of the owner's spouse and any minor children); and (5) any person providing a guaranty on the loan. Return completed form to: 7(a) loans – to the lender processing the SBA application; 504 loans – to the Certified Development Company processing the SBA application; Disaster loans – to the Disaster Processing and Disbursement Center at 14925 Kingsport Road, Fort Worth, TX 76155-2243; and 8(a)/BD applicants who are *individuals claiming social and economic disadvantaged status and their spouses* – electronically at <http://www.sba.gov> or send hard copy with paper application to either of the following offices:

8(a) BD	Mail to the following address, if your firm is located in one of the states below:	Mail to the following address, if your firm is located in one of the states below:
	US Small Business Administration DPCE Central Office Duty Station Parkview Towers 1150 First Avenue 10th Floor, Suite 100I King of Prussia, PA 19406	Small Business Administration Division of Program Certification and Eligibility 455 Market Street, 6th Floor San Francisco, CA 94105
	MA, ME, NH, CT, VT, RI, NY, PR (Puerto Rico), VI (US Virgin Islands), NJ, PA, MD, VA, WV, DC, DE, GA, AL, NC, SC, MS, FL, KY, TN	IL, OH, MI, IN, MN, WI, TX, NM, AR, LA, OK, MO, IA

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)	
(Describe in Section 5)		Installment Account (Auto)	\$
Accounts & Notes Receivable	\$	Mo. Payments \$	
Life Insurance-Cash Surrender Value Only	\$	Installment Account (Other)	\$
(Complete Section 8)		Mo. Payments \$	
Stocks and Bonds	\$	Loan on Life Insurance	\$
(Describe in Section 3)		Mortgages on Real Estate	\$
Real Estate	\$	(Describe in Section 4)	
(Describe in Section 4)		Unpaid Taxes	\$
Automobile- Total Present Value	\$	(Describe in Section 6)	
(Describe in Section 5, and include Year/Make/Model)		Other Liabilities	\$
Other Personal Property	\$	(Describe in Section 7)	
(Describe in Section 5)		Total Liabilities	\$
Other Assets	\$	Net Worth	\$
(Describe in Section 5)			
Total	\$	Total	\$

Section 1. Source of Income	Contingent Liabilities
Salary	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.	

*Alimony or child support payments need not be disclosed in "Other Income unless it is desired to have such payments counted toward total income.
SBA Form 413 (8-11) Previous Editions Obsolete. This form was reproduced by Bridge Bank-SBA Lending Group

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 (e.g. Primary Residence, Other Residence, Rental Property, Land, etc.)			
Address			
Title in Name of:			
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).

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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).

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Section 7. Other Liabilities (Describe in detail).

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

Are any assets held in a Trust?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, name of Trust: _____
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I authorize SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.
CERTIFICATION: (to be completed by each person submitting the information requested on this form)

By signing this form, I certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that SBA or its participating Lenders, or Certified Development Companies will rely on this information when making decisions regarding an application for a loan from SBA or an SBA Participating Lender, or for participation in the SBA 8(a) Business Development (BD) program.

Signature: _____	Date: _____
Print Name: _____	Social Security Number: _____
Signature: _____	Date: _____
Print Name: _____	Social Security Number: _____

NOTICE TO LOAN APPLICANTS: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan. A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 U.S.C. § 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally insured institution, a false statement is punishable under 18 U.S.C. § 1014 by imprisonment of not more than 30 years and/or a fine of not more than \$1,000,000.

NOTICE TO APPLICANTS OR PARTICIPANTS IN THE 8(a) BD PROGRAM: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Any person who misrepresents a business concern's status as an 8(a) Program participant or SDB concern, or makes any other false statement in order to influence the 8(a) certification or other review process in any way (e.g., annual review, eligibility review), shall be: (1) Subject to fines and imprisonment of up to 5 years, or both, as stated in Title 18 U.S.C. § 1001; (2) subject to fines of up to \$500,000 or imprisonment of up to 10 years, or both, as stated in Title 15 U.S.C. § 645; (3) Subject to civil and administrative remedies, including suspension and debarment; and (4) Ineligible for participation in programs conducted under the authority of the Small Business Act.

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. PLEASE DO NOT SEND FORMS TO OMB.

Management Resume

Personal Information			
Name (First, Middle, Last)		Social Security Number	
Date of Birth	Place of Birth (City, State, Country)		
Home Address		From: _____ To: ____	
Previous Home Address (omit if more than 10 years ago)		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 (Complete Spouse's information if they are a co-borrower or guarantor)			
<u>Borrower</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>Spouse</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	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? _____	
<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?	

Request for Transcript of Tax Return

▶ Request may be rejected if the form is incomplete or illegible.

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can also call 1-800-829-1040 to order a transcript. If you need a copy of your return, use Form 4506, Request for Copy of Tax Return. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code	
4 Previous address shown on the last return filed if different from line 3	
5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.	

Caution. If the transcript is being mailed to a third party, ensure that you have filled in line 6 and line 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy.

6 **Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶

- a **Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days
- b **Account Transcript**, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 calendar days.
- c **Record of Account**, which is a combination of line item information and later adjustments to the account. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days

7 **Verification of Nonfiling**, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days

8 **Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2007, filed in 2008, will not be available from the IRS until 2009. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days

Caution. If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9 **Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, either husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note.** For transcripts being sent to a third party, this form must be received within 120 days of signature date.

	Telephone number of taxpayer on line 1a or 2a
Signature (see instructions)	Date
Title (if line 1a above is a corporation, partnership, estate, or trust)	
Spouse's signature	Date

Sign Here

BUSINESS DEBT SCHEDULE

COMPANY NAME _____

Please mark any debts that are to be refinanced with the proposed SBA loan. Include a copy of the Note agreement and a recent loan statement.

*This schedule should include **Business Notes or Loans** only, including Term Loans, Line of Credit, Mortgages, Equipment Leases and other contractual obligations. Do not list trade accounts payable or accrued liabilities.*

CREDITOR (NAME AND ACCOUNT NUMBER)	ORIGINAL DATE	ORIGINAL AMOUNT	PRESENT BALANCE	INTEREST RATE	MONTHLY PAYMENT	MATURITY DATE	COLLATERAL/ SECURITY	CURRENT/ DELINQUENT	CHECK IF LOAN IS TO BE REFINANCED
TOTAL PRESENT BALANCE (Total must agree with balance shown on Interim Balance Sheet)									

Signature

Date