



**TELL US ABOUT YOUR FINANCIAL STATUS, PLEASE PROVIDE INFORMATION FOR THE PAST TWO YEARS**

For Fiscal Year Ended: \_\_\_\_\_ Annual Sales \_\_\_\_\_ Net Profit \_\_\_\_\_

For Fiscal Year Ended: \_\_\_\_\_ Annual Sales \_\_\_\_\_ Net Profit \_\_\_\_\_

**TELL US WHO OWNS YOUR BUSINESS — OWNER #1**

*All Owners must be listed. Attach a separate sheet if necessary. Please treat references in the application to a "spouse" as including reference to a "Registered Domestic Partner" (RDP).*

Marital Status:  Married  Separated  RDP  Unmarried | First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_ | Date of Birth \_\_\_\_\_

Residence Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_  Rent  Own # of Years \_\_\_\_\_ Payment Amount \$ \_\_\_\_\_ and Term \_\_\_\_\_

Indicate other obligations you are required to pay, such as alimony or child support and the monthly amount of the obligation. Obligation \_\_\_\_\_ Amount \$ \_\_\_\_\_ Are any assets held in Trust?  Yes  No

**SPOUSE/REGISTERED DOMESTIC PARTNER INFORMATION, IF APPLICABLE**

First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Social Security Number [ ][ ][ ]-[ ][ ][ ]-[ ][ ][ ][ ][ ] Date of Birth \_\_\_\_\_

**TELL US ABOUT WHO OWNS YOUR BUSINESS — OWNER #2**

Marital Status:  Married  Separated  RDP  Unmarried | First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_ | Date of Birth \_\_\_\_\_

Residence Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_  Rent  Own # of Years \_\_\_\_\_ Payment Amount \$ \_\_\_\_\_ and Term \_\_\_\_\_

Indicate other obligations you are required to pay, such as alimony or child support and the monthly amount of the obligation. Obligation \_\_\_\_\_ Amount \$ \_\_\_\_\_ Are any assets held in Trust?  Yes  No

**SPOUSE/REGISTERED DOMESTIC PARTNER INFORMATION, IF APPLICABLE**

First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Social Security Number [ ][ ][ ]-[ ][ ][ ]-[ ][ ][ ][ ][ ] Date of Birth \_\_\_\_\_

**AGREEMENTS/SIGNATURES**

The undersigned certifies that all statements in this application and on each document required to be submitted in connection herewith are true, correct, and complete. The undersigned authorizes Exchange Bank ("Bank") to verify the information provided and to obtain credit reports in connection with this request or for periodic review of any credit extended to the business applicant and the individual owner(s) signing below. The undersigned authorizes the Bank to make such inquiries and gather such information, including obtaining credit reports, from time to time, as the Bank deems necessary and reasonable concerning any information provided the Bank on the application or on any such required document. The undersigned further agrees to notify the Bank promptly of any material change in any such information.

The undersigned also agrees to comply with the terms and conditions of the specific loan documentation that will be sent to the business applicant if the credit is approved. Each person signing below certifies that he/she is signing on behalf of the business applicant in the capacity indicated next to the signer's name and that such signer is authorized to execute the credit application on behalf of the business applicant. The undersigned also authorizes Bank to obtain copies of its tax returns and information from the IRS and other taxing authorities and agrees to execute whatever forms Bank requests to obtain such information.

Receipt of the Equal Credit Opportunity Disclosure, "The Right to Request Written Adverse Action Notice," "Fair Lending Notice," and "Right to Receive Copy of Appraisal," are hereby acknowledged.

Authorized Signature	Print Name	Title	Date
X			
X			
X			
X			

**CONSENT BY BUSINESS PRINCIPAL(S) TO OBTAIN CONSUMER CREDIT REPORT** In connection with this application for credit with Exchange Bank ("Bank") and any subsequent financial products or services Bank may offer applicant, I/we consent to Bank obtaining one or more consumer credit reports on me/us from time to time. Bank may also investigate my/our background, income, credit or credit worthiness, assets or other matters as it reasonably deems necessary or appropriate.

X			
X			
X			
X			

**For corporations:** Provide name and title of president and secretary. All shareholders owning 20% or more of stock must sign the personal guaranty which will be sent with the loan documents.



## **Business Loan Application Disclosures**

### **1. IDENTIFICATION OF NEW CUSTOMERS**

To help the government fight the funding of terrorism and money laundering activities, federal law requires us to obtain, verify, and record information that identifies each person who opens an account. When you open your first account with us, we will ask for 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. In addition, you may be asked several questions, and we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and by federal law. We may repeat the identification process when you open another account and have had no active account with us during the past five years.

### **2. CALIFORNIA FAIR LENDING NOTICE**

It is illegal to discriminate in the provision of or in the availability of financial assistance because of the consideration of:

1. Trends, characteristics or conditions in the neighborhood or geographic area surrounding a housing accommodation, unless the financial institution can demonstrate in the particular case that such consideration is required to avoid an unsafe and unsound business practice; or
2. Race, color, religion, sex, marital status, national origin or ancestry.

It is illegal to consider the racial, ethnic, religious or national origin composition of a neighborhood or geographic area surrounding a housing accommodation or whether or not such composition is undergoing change, or is expected to undergo change, in appraising a housing accommodation or in determining whether or not, or under what terms and conditions, to provide financial assistance.

These provisions govern financial assistance for the purpose of the purchase, construction, rehabilitation or refinancing of one-to-four-unit family residences occupied by the owner and for the purpose of the home improvement of any one-to-four-unit family residence.

If you have questions about your rights, or if you wish to file a complaint, contact the management of this financial institution or:

State of California  
Department of Business Oversight  
1515 K Street, Suite 200  
Sacramento, CA. 95814-4052

**OR**

State of California  
Department of Business Oversight  
45 Fremont Street, Suite 1700  
San Francisco, CA. 94105-2219

### **3. RIGHT TO REQUEST SPECIFIC REASONS FOR CREDIT DENIAL GIVEN AT TIME OF APPLICATION**

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 the statement, please contact us at the following address or telephone numbers within 60 days from the date you are notified of our decision:

Exchange Bank  
P O Box 760  
Santa Rosa, CA 95402  
Telephone Numbers: (707) 524-3000 or (800) 995-4066

We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

**NOTICE:** The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, 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 program; 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:

Federal Deposit Insurance Corporation  
Consumer Response Center  
1100 Walnut Street, Box #11  
Kansas City, MO. 64106

### **4. DISCLOSURE CONCERNING YOUR RIGHT TO RECEIVE A COPY OF THE APPRAISAL REPORT**

We may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly give you a copy of any appraisal, even if your loan does not close. You can pay for an additional appraisal for your own use at your own expense.

If you applied for a loan secured by a one- to four-family residential structure, you have the right to receive a copy of the appraisal report and other written valuations developed in connection with your application for credit. We will deliver a copy to your last-known address. If there is more than one applicant, a copy will be delivered to the primary applicant, where one is readily apparent. Copies can be provided to a consumer applicant in an electronic format so long as the creditor complies with the disclosure and consumer consent provisions of the Electronic Signatures in Global and National Commerce Act (E-SIGN Act).

The Bank may require that you pay for the cost incurred in obtaining the appraisal or valuation. Please note that any appraisal we obtain in connection with your loan application will be for the purpose of assisting us in determining whether to extend credit to be secured by the appraised property and, if so, upon what terms. Depending upon the amount and the nature of the loan requested among other factors, the appraisal may be conducted by a certified appraiser, a licensed appraiser, or someone who is neither licensed nor certified. The person performing the appraisal may be a Bank employee or an independent contractor. The appraisal report should not be relied upon by you or anyone else to determine the value, description, or condition of the property. If you wish professional assistance in determining those matters, you should retain your own appraiser or other advisor.

## **5. CALIFORNIA NOTICE OF RIGHT TO RECEIVE COPY OF APPRAISAL OF NON-RESIDENTIAL REAL PROPERTY**

You have a right under Section 11423 of the California Business and Professions Code to a copy of the appraisal report obtained by this Bank in support of your application for credit, provided that you have paid for the appraisal and the cost of duplicating the appraisal. In order to obtain a copy of your appraisal report, write us at:

Exchange Bank  
Loan Service Center #200  
P. O. Box 760  
Santa Rosa, CA. 95402

We must hear from you no later than 90 days after we notify you about the action taken on your credit application, including notice of an incomplete application. If you withdraw your application, you must make your request for an appraisal report within 90 days of the withdrawal.

If you request a copy of your appraisal report, and you have paid for the costs of the appraisal, we will send you a copy at the address shown on your loan application. You are only entitled to receive a copy of the appraisal for purposes of evaluating your pending request for an extension of credit with this Bank.

## **6. REPORTING INFORMATION TO CREDIT BUREAUS:**

Lender may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.



### CERTIFICATION OF BENEFICIAL OWNER(S)

Persons opening an account or maintaining a business relationship on behalf of a legal entity must provide the following information:

a. Name and Title of Natural Person opening account or maintaining the business relationship:

\_\_\_\_\_

b. Name and Address of Legal Entity for which the account is being opened/maintained:

\_\_\_\_\_

**LEGAL ENTITY TYPE:**

- For Profit Corporation  Non-Profit Corporation  Limited Liability Company (LLC)  Limited Partnership (LP)
- Limited Liability Partnership (LLP)  General Partnership  Other: \_\_\_\_\_

c. The following information for **one** individual with significant responsibility for managing the legal entity listed above:

- An executive officer or senior manager (e.g. Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer); or,
- Any other individual who regularly performs similar functions. (If appropriate, an individual listed under section (d) above may also be listed in this section (c)).

**Individual with Control – Information:**

Bank Use Only: OFAC  EC

Individual Full Name: \_\_\_\_\_

Business or Residence Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Primary ID Type: \_\_\_\_\_ ID Issue Date: \_\_\_\_\_

ID Number: \_\_\_\_\_ ID Expiration Date: \_\_\_\_\_

Non US Person SSN: \_\_\_\_\_ Country of Issuance: \_\_\_\_\_

d. The following information for each individual\*, if any, who directly or indirectly, through any contract, arrangement, understanding, relationship, or otherwise, owns 25% or more of the equity interests of the legal entity listed above:

**Beneficial Owner 1 Information:** \_\_\_\_\_ % of ownership

Bank Use Only: OFAC  EC

Individual Full Name: \_\_\_\_\_

Business or Residence Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Primary ID Type: \_\_\_\_\_ ID Issue Date: \_\_\_\_\_

ID Number: \_\_\_\_\_ ID Expiration Date: \_\_\_\_\_

Non US Person SSN: \_\_\_\_\_ Country of Issuance: \_\_\_\_\_

**Beneficial Owner 2 Information:** \_\_\_\_\_ % of ownership

Bank Use Only: OFAC  EC

Individual Full Name: \_\_\_\_\_

Business or Residence Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Primary ID Type: \_\_\_\_\_ ID Issue Date: \_\_\_\_\_

ID Number: \_\_\_\_\_ ID Expiration Date: \_\_\_\_\_

Non US Person SSN: \_\_\_\_\_ Country of Issuance: \_\_\_\_\_

**Beneficial Owner 3 Information:** \_\_\_\_\_ % of ownership **Bank Use Only:** OFAC  EC

Individual Full Name: \_\_\_\_\_  
 Business or Residence Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Primary ID Type: \_\_\_\_\_ ID Issue Date: \_\_\_\_\_  
 ID Number: \_\_\_\_\_ ID Expiration Date: \_\_\_\_\_  
 Non US Person SSN: \_\_\_\_\_ Country of Issuance: \_\_\_\_\_

**Beneficial Owner 4 Information:** \_\_\_\_\_ % of ownership **Bank Use Only:** OFAC  EC

Individual Full Name: \_\_\_\_\_  
 Business or Residence Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Primary ID Type: \_\_\_\_\_ ID Issue Date: \_\_\_\_\_  
 ID Number: \_\_\_\_\_ ID Expiration Date: \_\_\_\_\_  
 Non US Person SSN: \_\_\_\_\_ Country of Issuance: \_\_\_\_\_

\*If no individual meets this definition, please enter "Not Applicable" above and **explain below** (i.e. All <25%; Charity/Non-Profit; etc.):

e. Certifications:

I,  (*name of natural person opening account*), hereby certify, to the best of my knowledge, that the information above is complete and correct.

**For auto-renewing certificates of deposit, I agree to notify Exchange Bank promptly in writing of any change to the beneficial ownership information contained in this Certification of Beneficial Ownership.**

**SIGNATURE:**

**DATE:**  Legal Entity Identifier (Optional): \_\_\_\_\_

Bank Use	
Reference Number(s)	
Rec'd by: _____	Date: _____
Input by: _____	Date: _____
(MM/DD/YYYY)	

## CERTIFICATION REGARDING BENEFICIAL OWNERS OF LEGAL ENTITY CUSTOMERS

### I. GENERAL INSTRUCTIONS

#### What is this form?

To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

#### Who has to complete this form?

This form must be completed by the person opening a new account on behalf of a legal entity with any of the following U.S. financial institutions: a bank or credit union, a broker or dealer in securities, a mutual fund, a futures commission merchant, or an introducing broker in commodities.

For the purposes of this form, a **legal entity** includes a corporation, a limited liability company or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. **Legal entity** does not include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

#### What information do I have to provide?

This form requires you to provide the name, address, date of birth and Social Security number (or passport number or other similar information, in the case of Non-U.S. Persons) for the following individuals (i.e., the **beneficial owners**):

- i. Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation); **and**
- ii. An individual with significant responsibility for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer).

The number of individuals that satisfy this definition of “beneficial owner” may vary. Under section (d), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (d), you must provide the identifying information of one individual under section (c). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30% equity interest). Thus, a completed form will contain the identifying information of *at least one* individual (under section (c)), and *up to five* individuals (i.e., one individual under section (c) and four 25 percent equity holders under section (d)).

The financial institution may also ask to see a copy of a driver’s license or other identifying document for each beneficial owner listed on this form. *A legal entity may have multiple “beneficial owners,” this form requires you to list only those that own 25% or more (up to four) under section d, above, and one individual with significant responsibility under section c.*

In addition, the requirements vary for certain entity types:

- Because **nonprofit corporations** do not have ownership interests, only information related to the **control** of the nonprofit is required under the rule.
- When a **family/ living trust**, directly or indirectly, through any contract or arrangement, owns 25 percent or more of the equity interests of a legal entity customer, the beneficial owner under the ownership/equity prong is the trustee. Where there are **multiple trustees or co-trustees**, **one co-trustee** who owns 25 percent or more of the equity interests of a covered legal entity customer must be listed on the certification form.