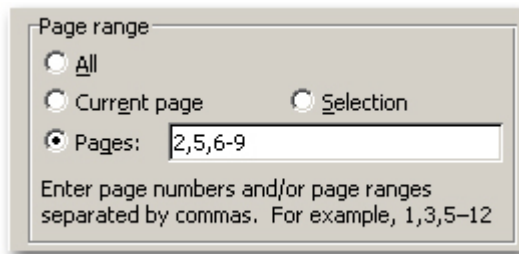


This Small Business Administration (SBA) Loan Packet includes the following forms:

<a href="#">Requirements for SBA Loans</a>	Page 2
<a href="#">Business Credit Application</a>	Page 3
<a href="#">Personal Financial Statement</a>	Page 6
<a href="#">Business Applicant Declarations</a>	Page 8
<a href="#">Business Description</a>	Page 9
<a href="#">Business Debt Schedule</a>	Page 10
<a href="#">Manager   Owner Background</a>	Page 11
<a href="#">Limited Liability Company Information</a>	Page 13
<a href="#">Certificate of Corporate Secretary</a>	Page 14

Fill in the fields in these online forms and then print. Do not e-mail confidential personal information. To print individual pages, go to **File>Print**, and in the page range section of the print menu, type in the page numbers you want to print, separated by commas. Or to print several pages in a row, type a dash between the range of page numbers you want to print. See example below:



Page range

All

Current page       Selection

Pages:

Enter page numbers and/or page ranges separated by commas. For example, 1,3,5-12

The documents listed below are required to process your Small Business Administration (SBA) loan with Exchange Bank. Submit all applicable forms and documents to your loan officer, who is available to answer any questions that come up in this process.

### Submission Requirements

Make sure to do the following when preparing documentation:

- Type or write in ink when filling out all forms
- All photocopied documents must have original signatures
- Tax returns should include all schedules

### Preliminary Information

- Completed [Exchange Bank Credit Application](#) (applicant may provide same information in a different format)
- Copy of Purchase Agreement, if applicable and Preliminary Title Report, if available
- Three years complete individual federal tax returns for all applicants and guarantors with 20 percent or more ownership in the borrowing entity
- Current Income Statement and Balance Sheet and three years tax returns for the business, with all schedules
- Three years tax returns for any other related entities that affects personal or business cash flow
- Completed [Personal Financial Statement](#) or fully executed Uniform Residential Loan Application (Form 1003 revision date 7/05) with complete real estate schedules for all applicants or guarantors with 20 percent or more ownership
- Signed copy of [Exchange Bank's Business Declarations form](#) for the business entity applicants or Uniform Residential Loan Application fully executed and pertaining to the business entity
- If real estate debt refinance, please provide original purchase date and amount paid (plus cost of subsequent improvements, if applicable) and copies of all notes to be refinanced

### Additional Documentation

The following documents may be necessary to underwrite and/or fund your loan. Additional information may also be required.

- Completed [Business Description form](#)
- Completed [Business Debt Schedule](#) (should match the interim balance sheet)
- Accounts receivable and accounts payable agings (same dates as interim financial statement)
- Franchise Agreement and Franchise Circular
- Business license and/or permits
- [Management | Owner Background form](#), copied and completed by each 20 percent owner and each key manager
- Completed Environmental Questionnaire form
- Request for Tax Transcripts (IRS Form 4506-T), signed by authorized individual
- Entity formation documents (Corporations, LLC's, Partnerships, Trusts, etc.)
- Bids and/or purchase orders for inventory, furniture, fixtures and equipment
- Copies of all leases, as applicable
- Copies of ground lease(s) if leasehold
- Fire/hazard/liability insurance on all collateral securing the loan. Life insurance may also be required on your transaction
- Proforma Income Statement
- [Certificate of Corporate Secretary form](#)

**Note for Construction Loans:** Additional information required, contact your Loan Officer.

**A. General Information**

Business name ( <i>Applicant</i> )		Business phone number	
Physical street address including city, state and ZIP ( <i>no P.O. Boxes</i> )			
Mailing address ( <i>if different than above</i> )			
Nature of business product or service			
Date business established	How long under current management	Number of employees	Tax ID number

**B. Credit Request**

Amount requested	Use of proceeds
Source of income for repayment	Secondary source
Collateral offered	Repayment structure requested

**C. Business Organization**

<input type="checkbox"/> Proprietorship	<input type="checkbox"/> General Partnership	<input type="checkbox"/> S-Corporation	<input type="checkbox"/> Other:	State in which organized
<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> C-Corporation		

**Principals** (*list additional principals on separate sheet*)

1. Name, title and position		<input type="checkbox"/> Sole owner	Percent of ownership	Social Security number
Home street address including city, state and ZIP ( <i>no P.O. Boxes</i> )			Home phone number	
Valid driver's license or ID number	Date of issuance	Expiration date	Date of birth	
2. Name, title and position			Percent of ownership	Social Security number
Home street address including city, state and ZIP ( <i>no P.O. Boxes</i> )			Home phone number	
Valid driver's license or ID number	Date of issuance	Expiration date	Date of birth	
3. Name, title and position			Percent of ownership	Social Security number
Home street address including city, state and ZIP ( <i>no P.O. Boxes</i> )			Home phone number	
Valid driver's license or ID number	Date of issuance	Expiration date	Date of birth	
4. Name, title and position			Percent of ownership	Social Security number
Home street address including city, state and ZIP ( <i>no P.O. Boxes</i> )			Home phone number	
Valid driver's license or ID number	Date of issuance	Expiration date	Date of birth	
5. Name, title and position			Percent of ownership	Social Security number
Home street address including city, state and ZIP ( <i>no P.O. Boxes</i> )			Home phone number	
Valid driver's license or ID number	Date of issuance	Expiration date	Date of birth	

# BUSINESS CREDIT APPLICATION

<b>D. Miscellaneous Information</b>	<b>YES</b>	<b>NO</b>
1. Is the applicant an endorser, guarantor or co-maker for obligations (including any lease obligation, e.g. vehicle, equipment, business location) not listed on financial statements submitted?	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the applicant party to any claim or lawsuit?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you and/or the applicant ever filed for bankruptcy? <i>CHAPTER:</i> <i>FILING DATE:</i>	<input type="checkbox"/>	<input type="checkbox"/>
4. Does the applicant's business activity involve the generation, use, transportation, storage or disposal of any hazardous material?	<input type="checkbox"/>	<input type="checkbox"/>
5. Does the applicant owe any taxes that are past due? <i>AMOUNT:</i> <i>OWED TO:</i>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are any assets pledged or mortgaged other than stated on business and personal financial statements submitted?	<input type="checkbox"/>	<input type="checkbox"/>

# BUSINESS CREDIT APPLICATION

## STATEMENTS BY APPLICANT AND PRINCIPAL(S) (as applicable):

**GENERAL:** I certify that the information provided on and with this Business Credit Application (Application), including any financial statements, are complete and correct and that I am authorized to execute this Application on behalf of the Applicant. I authorize Exchange Bank and its affiliates (collectively, Lender) to obtain balance and payoff information on all accounts requiring payoff as a condition of approving this Application. I understand that Lender may check my credit record(s) and any statements made by me. I give permission to all my creditors to give Lender any information it needs to make a credit granting decision. I further authorize Lender to provide credit reporting agencies and other creditors information relating to any credit Lender might grant pursuant to this Application. I agree to promptly notify Lender of any material changes that would affect the accuracy of these statements. All information is as of this date unless otherwise stated. I authorize Lender to cause such UCC financing statements to be filed in such form and in such jurisdictions and encumbering such assets as Lender or its counsel deem appropriate in their sole and absolute discretion.

**AUTHORIZATION TO OBTAIN CREDIT REPORT:** I authorize Lender to obtain a copy of my credit report in connection with this request for credit, and any modifications, renewals or extensions of such credit. I acknowledge that Lender shall use the credit report in connection with a credit transaction requested hereunder, and that Lender has a legitimate business need for the information. I acknowledge that this authorization is continuing in nature, and that Lender may obtain updated or additional credit reports at any time in connection with the renewal, extension or other modification of any loan or other credit accommodation related to this Application. I further direct the credit reporting agency to which Lender delivers a copy of this authorization to furnish the credit report to Lender.

**By signing below, I declare that I have read and understand the above statements.**

- This is an application for business credit submitted on behalf of the entity identified in Section A of this application form. (If the individual owners of the business intend to personally guaranty the loan, include guarantor information in Section C above.) Authorized signor to sign below.
- I am applying for business credit in my individual name and:
- I am relying on my own income and assets
  - I am relying on my own income and assets and the income and/or assets owned jointly by me with another person or by another source identified as follows (list below or on a separate sheet if necessary):

\_\_\_\_\_

\_\_\_\_\_

- We are applying for joint business credit. The names of the joint applicants are as follows (list below or on a separate sheet if necessary, co-applicants to sign below):

\_\_\_\_\_

\_\_\_\_\_

APPLICANT OR AUTHORIZED SIGNOR SIGNATURE	DATE	CO-APPLICANT SIGNATURE*	DATE
TITLE		CO-APPLICANT SIGNATURE*	DATE
		CO-APPLICANT SIGNATURE*	DATE
		CO-APPLICANT SIGNATURE*	DATE
		CO-APPLICANT SIGNATURE*	DATE

\* The spouse of an applicant or co-applicant need not sign unless he or she intends to be a co-applicant.

## FOR BANK USE ONLY

Lender: \_\_\_\_\_ Branch: \_\_\_\_\_ Date application received: \_\_\_\_\_

Application taken:  In person  By phone  By mail or fax  By third party (outside Exchange Bank)

New customer or existing customer less than one year?  No  Yes — verify ID

Is application for a dwelling-secured loan to purchase, refinance or improve a dwelling<sup>1</sup>, or improve the real property on which a dwelling is located?

Yes — If applicant is a natural person, attach completed Government Monitoring Information sheet  No — N/A — Line of Credit

<sup>1</sup> "Dwelling" means a residential structure, whether or not attached to real property, and includes principal residences, vacation or second homes, rental properties, mobile and manufactured homes, multi-family structures (such as apartment buildings), condominiums and cooperative units.

Complete this form for each of the following:

- **Business proprietor**
- **Limited partners who own 20 percent or more interest and general partners**
- **Stockholders owning 20 percent or more of voting stock, corporate officers and directors**
- **Any other person or entity providing a guaranty on the loan**

**Applicant/Borrower Information**

Name: _____	Business name: _____
Home phone: _____	Business phone: _____
Home address: _____	
City: _____	State: _____ ZIP: _____
E-mail address: _____	

<b>ASSETS</b>	<b>(Omit cents)</b>	<b>LIABILITIES</b>	<b>(Omit cents)</b>
Cash on hand and in banks	\$	Accounts payable	\$
Savings accounts	\$	Notes payable to banks and others (describe in Section 2)	\$
IRA or other retirement accounts	\$	Unpaid taxes (describe in Section 6)	\$
Accounts and notes receivable	\$	Installment account (other) monthly payments \$	\$
Life insurance - cash surrender value only (complete Section 8)	\$	Loan on life insurance	\$
Stocks and bonds (describe in Section 3)	\$	Line of credit tied to real estate	\$
Real estate (describe in Section 4)	\$	Mortgages on real estate (describe in Section 4)	\$
Automobile — present value	\$	Installment account (auto) monthly payments \$	\$
Other personal property (describe in Section 5)	\$	Other liabilities (describe in Section 7)	\$
Other Assets (describe in Section 5)	\$	<b>Total Liabilities:</b>	\$
<b>Total Assets:</b>	\$	<b>Net Worth:</b>	\$

**Contingent Liabilities**

As endorser or co-maker	\$	Provision for federal income tax	\$
Legal claims and judgments	\$	Other special debt	\$

**SECTION 1. Source of Income**

Salary	\$
Net Investment Income	\$
Real Estate Income	\$
Other Income (describe below)*	\$

Please describe any recurring income not reflected on previous tax returns:

\*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 Note Holder(s)	Original Balance	Current Balance	Payment Amount	Frequency	How Secured/Endorsed (Type of Collateral)
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		





# BUSINESS APPLICANT DECLARATIONS

Type of entity:  General Partnership  Limited Partnership  LLC  Corporation  LLP

Legal name of entity: \_\_\_\_\_

Declarations				
If you answer "Yes" to any of the questions below, please attach a separate sheet with details for explanation.	Borrower		Co-Borrower	
	Yes	No	Yes	No
a. Are there any outstanding judgments against you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Have you been declared bankrupt within the past seven years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Have you had property foreclosed upon or given title or deed in lieu thereof in the last seven years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Are you a party to a lawsuit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment? If "Yes," provide details, including date, name, and address of Lender, FHA or VA case number, if any, and reasons for the action. (This includes home mortgage loans, Small Business Administration loans, home improvement loans, educational loans, manufactured (mobile) home loans, any mortgage, financial obligation, bond, or loan guarantee.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond or loan guarantee? If "Yes," give details as described in the preceding question.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Is any part of the down payment borrowed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Acknowledgement and Agreement

Each of the undersigned specifically represents to Exchange Bank (Lender) and to Lender's actual potential agents, brokers, processors, attorneys, insurers, service persons, successors and assigns that the information provided is true and correct as of the date set forth. The undersigned applies for the loan indicated in this application to be secured by real property and hereby agrees and acknowledges that the property will not be used for any illegal or restricted purpose, and that all statements made in this application, and all attachments, are true and made for the purpose of obtaining the loan. Verification may be from any source named in this application and/or attachments.

I/We fully understand that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code, Section 1014.

SIGNATURE	TITLE	DATE
SIGNATURE	TITLE	DATE
SIGNATURE	TITLE	DATE
SIGNATURE	TITLE	DATE



**We have identified key items we need to know about your business below. If you have a more in-depth business plan already completed, or if you require more space to adequately answer all these questions, you may attach additional pages or a separate business plan with your application in lieu of this form.**

**Type of business including products and services offered.**

**Complete history of business including start-up dates, analysis of industry to include customer base, trends, competition and the seasonality of the business, if applicable. Also discuss future plans for growth or expansion, if applicable.**

**General location description including general area description, access and visibility.**

**General description of the actual business premise and primary collateral. This must include the total amount of square footage available and the amount occupied by your business.**

**How will this loan benefit your business?**



## SBA BUSINESS DEBT SCHEDULE

Complete the following information on all installment debts, contracts, notes and mortgages payable. Indicate items to be paid by loan proceeds with an asterisk (\*) and give reason for payment. Total present balance and date must match latest Interim Balance Sheet submitted. Do not include accounts payable or accrued liabilities.

Creditor Name and Address	Original Date	Original Amount	Present Balance	Interest Rate	Monthly Payment	Maturity Date	Collateral/ Security
		\$	\$		\$		
		\$	\$		\$		
		\$	\$		\$		
		\$	\$		\$		
		\$	\$		\$		
		\$	\$		\$		
		\$	\$		\$		
		\$	\$		\$		
		\$	\$		\$		
<b>Total Present Balance</b>			<b>\$</b>	Total must match balance shown on Interim Balance Sheet			

\_\_\_\_\_  
COMPANY NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

Same date as Interim Balance Sheet

To be completed in full by each officer, director, key employee or owner of 20 percent or more of the company. If an item is not applicable, please indicate with N/A.

Personal Information				
First name	Middle	Maiden (if applicable)	Last	
Place of birth		Date of birth	Social Security number	E-mail address
Marital Status	Spouse's name	Middle	Last	Spouse's Social Security number
U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No		If No, give Alien Registration number		
Home address			Home phone	Business phone
City	State	ZIP	Resided since (month/year)	
Most recent past address			Resided from (month/year)	
City	State	ZIP	Until (month/year)	

Employment History
--------------------

List chronologically, beginning with current employment. You may attach a resume containing work experience and education history.

Position/Title	Employed from (month/year)	Until (month/year)		
Company name	Type of business			
Address	City	State	ZIP	

Position/Title	Employed from (month/year)	Until (month/year)		
Company name	Type of business			
Address	City	State	ZIP	

Position/Title	Employed from (month/year)	Until (month/year)		
Company name	Type of business			
Address	City	State	ZIP	

# MANAGEMENT | OWNER BACKGROUND

## Education History

	Name of Institution	City, State	Degree/Certificate	Year Graduated
High School				
College/University				
Technical School				
Graduate School				
Other education				

## Military Service

List branch, years served, rank achieved and any special training, commendations or awards.

## Legal History

- Yes  No Have you or your business or any business with which you have been associated ever been in bankruptcy or insolvency proceedings?  
Details: \_\_\_\_\_
- Yes  No Are you or your business involved in any pending lawsuits?  
Details: \_\_\_\_\_
- Yes  No Are you or your business presently under indictment, or on parole or probation?  
Details: \_\_\_\_\_
- Yes  No Have you ever been **charged with or arrested for** any criminal offense other than a minor vehicle violation?  
Details: \_\_\_\_\_
- Yes  No Have you ever been **convicted of** any criminal offense other than a minor motor vehicle violation?  
Details: \_\_\_\_\_
- Yes  No Do you presently have an SBA loan? If so, who is the lender? Are your payments current?  
Details: \_\_\_\_\_
- Yes  No Are you more than 60 days delinquent under the terms of any (a) administrative order, (b) court order, or (c) repayment agreement that requires payment of child support?  
Details: \_\_\_\_\_
- Yes  No Are any of your assets held in a trust?  
Details: \_\_\_\_\_

## Signature

I the undersigned declare under penalty of perjury that the above statements are true and correct.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
DATE

**Managers**

List the names of all managers below:

<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

**Members**

List the names of all members below:

<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

**Owners and Investors**

List the names of all owners and investors below:

Percent of ownership:

<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
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CERTIFICATE OF CORPORATE SECRETARY

I certify that I am the secretary of \_\_\_\_\_ and that the following persons hold positions in this corporation and/or own shares in this corporation in the amount and form designated.

Directors

List the names of all directors below:

Five sets of horizontal lines for listing directors.

Officers

List the names of all officers by title below:

Five rows for listing officers: President, Vice President, Secretary, and Treasurer.

Shareholders

List the names of all shareholders below:

Number of shares:

Dollar value of outstanding shares:

Table with 3 columns: Name, Number of shares, Dollar value of outstanding shares. Includes 8 rows of data lines.

SECRETARY SIGNATURE PRINTED NAME DATE