



Making more possible.

SBA Loan Application Forms Packet

Please Note

Each person owning 20% or more of the borrowing company will be considered an “Applicant” and must complete and submit personal financials.

Questions?

Please contact your Business Development Officer.

Ready to make *more possible*?

We look forward to reviewing the information you submit so that we may prepare a custom financing solution that will make more possible for you, your business, your employees, and your customers.

Your FSB Small Business Lending BDO will confirm the forms and items needed to proceed with a formal review of your loan request.

Have questions? Contact your BDO directly for guidance and support.

IN THIS PACKET

LOAN APPLICATION FORM Pages 3-5
Required from primary applicant.

BUSINESS HISTORY FORM Page 6
Required from primary applicant.

BUSINESS DEBT SCHEDULE FORM Page 7
Required from primary applicant.

SBA PERSONAL FINANCIAL STATEMENT Pages 8-13
*Required from all persons owning a 20% or greater stake in the company.
Married, spouse must also sign.*

MANAGEMENT RESUME Page 14
Required from all persons owning a 20% or greater stake in the company.

STATEMENT OF OFFENSE FORM Page 15
Required for any derogatory items noted on the Loan Application Form.

AUTHORIZATION TO OBTAIN AND RELEASE INFORMATION FORM Page 16
*Required from all persons owning a 20% or greater stake in the company.
Married, spouse must also sign.*

APPLICATION CHECKLIST Pages 17-18

LOAN APPLICATION FORM

Applicant does not have to employ an Agent or representative (including the Lender) to assist the Applicant with the loan application. By signing below the undersigned acknowledge(s) receipt of this Notice.

APPLICANT COMPANY

Legal Business Name:			
DBA Name (if applicable):			
Address:		City:	State: Zip:
Primary Contact Phone:		Primary Contact Fax:	
Primary Contact Cell:		Primary Contact Email:	
Type of Entity: Sole Proprietorship General Partnership Limited Partnership Corporation (Please specify: S Corp, C Corp, LLC)			
Date Established:	Date Incorporated:	State of Incorporation:	
# of Employees Existing:	# of Employees After this Financing:	Employer Tax I.D.:	
Website:			
Name & Address of Current Bank:			
Name of Franchise (if applicable):			

PROPOSED PROPERTY (If different from current Business Address)

Address:		City:	State: Zip:
----------	--	-------	-------------

OWNERSHIP INTEREST

List below the proprietor, owners, partners, officers and ALL stockholders in the business.
100% OWNERSHIP MUST BE SHOWN

NAME	TITLE	SSN	OWNERSHIP %

AFFILIATES

List below all business concerns in which the Applicant Company or any of the individuals listed in the Ownership section above have any ownership. (If additional affiliates, please attach on separate sheet)

Co. Name:		Individual Name:	
Address:	City:	State:	Zip:
Phone:	Percent of Ownership:		

Co. Name:		Individual Name:	
Address:	City:	State:	Zip:
Phone:	Percent of Ownership:		

INSURANCE INFORMATION

Hazard/Property Insurance

Company:	
Contact:	Phone:

Life Insurance: Does the company maintain Life Insurance on any owner or officer? If yes, provide details below.

Insured:	Beneficiary:	Amount: \$
Insured:	Beneficiary:	Amount: \$

ADDITIONAL INFORMATION

For each “Yes” answer to questions 2 – 8, the applicant involved must complete a Statement of Offense Form (pg. 16) to disclose the relevant details. If you responded “Yes” to questions 7 or 8, SBA Form 912 will also need to be completed by the applicant(s) involved.

1. Are you and all other applicants either U.S. Citizens or Lawful Permanent Residents?	Yes	No
2. Have you or any other applicant ever filed personal bankruptcy?	Yes	No
3. Have you or any other applicant ever been involved in a commercial bankruptcy?	Yes	No
4. Does the applicant or any affiliates have any current or previous SBA or other federal government guaranteed debt (e.g. USDA, PPP, EIDL)?	Yes	No
a. If you answered “Yes” to Question 7, is any of the financing currently delinquent?	Yes	No
b. If you answered “Yes” to Question 7, did any of this financing ever default and cause a loss to the Government?	Yes	No

5. Are you or your business involved in any pending lawsuits, including divorce?	Yes	No
6. Are you or any other applicant SBA employees, married to SBA employees, former SBA employees, or in any other way engaged with the federal government such that there may be the appearance of a conflict of interest with the SBA?	Yes	No
7. Do you, your spouse, any other applicant and/or their spouses currently hold a position of employment with a government classification of GS-13 or higher?	Yes	No
8. Has this loan request been previously submitted to the SBA?	Yes	No
9: Are any of the Applicant's revenues derived from gambling, loan packaging, or from the sale of products or services, or the presentation of any depiction, displays or live performances, of a prurient sexual nature?	Yes	No
10. Are you or any other applicant subject to any criminal offenses, indictments, criminal information, arrangements, probation, deferred probation, deferred prosecution, parole, arrests within the last six months, or any other means by which formal criminal charges are brought in any jurisdiction?	Yes	No
11. Have you or any other applicant ever pleaded guilty/nolo contendere, been on parole/probation, or been convicted of a criminal offense (other than a minor vehicle violation)?	Yes	No

LOAN REQUEST

Initial Estimated Loan Amount (Your BDO will work with you to finalize a loan structure and amount): \$		
Initial Estimated Use(s)-of-proceeds (check all that apply):		
Real Estate Purchase	Equipment Purchase	Debt Refinance
Business Acquisition	Partner Buy-out	Franchise Financing
Working Capital	Other:	

Signature:

Date:

BUSINESS HISTORY FORM

Background & History of principals and Company:

Describe the products/services you offer and what they do for the customer. Please provide any company brochures or literature you have.

What geographic/demographic areas do you service? Who are your customers and where are they located, how big is the market and what is your current and desired future market share?

Does any customer represent greater than 15% of your sales? Yes No
 If "Yes", please provide detail about the customer including general information (sales volume, public/private, years in business, etc.) and how long you have been servicing this customer.

Who are your primary competitors?

COMPETITOR	LOCATION	YOUR COMPETITIVE ADVANTAGE

How do you market your product/services? *(include information about distribution channels, suppliers including concentrations, seasonal swings, etc.)*

Describe your vision for the company over the next 2-3 years... 8-10 years? *(I.e. growth plans, changes in customer base, future capital expenditures, current capacity vs. future, management structure. Please also describe your management succession plan should you or a key member of your management die, become disabled and/or unable to work.)*

Applicant's Signature:

Date:

BUSINESS DEBT SCHEDULE

Company Name: _____ Date: _____

This schedule should list all loans, leases, and notes payable owed by the business, not accounts payable or accrued liabilities. It should correspond to your interim balance sheet which will also be reviewed. If the business holds no debt, please complete the top portion, write "NONE" in the section below, and provide your signature.

Creditor Name & Address	Current Balance	Monthly Payment	Maturity Date	Credit Limit (if line of credit)	Interest Rate (if line of credit)	Refinance this loan? (Y/N)	Collateral securing this debt (if applicable)

Applicant's Signature: _____ Date: _____



PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION

The purpose of this form is to collect information about the Business Applicant and its owners' financial condition. SBA uses the information required by this Form 413 as one of a number of data sources in analyzing the repayment ability and creditworthiness of an applicant for an SBA loan or, with respect to a surety bond, to assist in recovery in the event that the contractor defaults on the contract. SBA also uses the information to assess whether an individual meets the economic disadvantage threshold for the Women-Owned Small Business (WOSB) Program and the 8(a) Business Development (BD) Program. Submission of this information is required as part of your application for assistance. Failure to provide the information would impact the agency's decision on your application.

To complete this form

- 1) Check all that apply.
- 2) Complete the form in its entirety (attached a separate sheet, if necessary)
- 3) Review the applicable certifications and sign (spousal signature, if required)

<input type="checkbox"/> 7(a) loan / 504 loan / Surety Bonds 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; and (5) any person providing a guaranty on the loan (including the assets and liabilities of the owner's spouse and any minor children). Return completed form to: For 7(a) loans: the Lender processing the application for SBA guaranty For 504 loans: the Certified Development Company (CDC) processing the application for SBA guaranty For Surety Bonds: the Surety Company or Agent processing the application for surety bond guarantee
--

<input type="checkbox"/> Disaster Business Loan Application (Excluding Sole Proprietorships) Complete this form for: (1) each applicant; (2) each general partner; (3) each managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant business; and (5) any person providing an unlimited guaranty on the loan. Return completed form to: Disaster Processing and Disbursement Center at 14925 Kingsport Road, Fort Worth, TX 76155-2243 or FAX to 1-202-481-1505 or disasterloans@sba.gov
--

<input type="checkbox"/> Women Owned Small Business (WOSB) Federal Contracting Program This form must be completed by each individual claiming economic disadvantage in connection with the SBA's Women-Owned Small Business (WOSB) Federal Contracting Program. A separate form must be completed by the individual's spouse, unless the individual and the spouse are legally separated. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed. In addition, each individual claiming economic disadvantage must update the form as changes arise, but at least annually, to ensure the information is current, accurate and complete. SBA's regulations state that to be considered economically disadvantaged for purposes of the WOSB Program, a woman must have an adjusted gross income averaged over the three prior fiscal years of \$350,000 or less; less than \$6 million in the fair market value of all her assets (to include her primary residence and value of the business concern); and less than \$750,000 in personal net worth (excluding equity interest in her personal residence and ownership interest in the business, and funds invested in a retirement account that are unavailable until retirement age). 13 C.F.R. §127.203. The information contained in this form must be submitted and certified through beta.certify.sba.gov

<input type="checkbox"/> 8(a) Business Development Program 8(a) applicants must show that 51% of the firm is owned by one or more individuals determined by the SBA to be socially and economically disadvantaged. The information contained in this form must be submitted by each socially and economically disadvantaged individual using their one time 8(a) eligibility to qualify this firm for 8(a) certification. If married, the spouse must complete a separate SBA Form 413, except when the individual and the spouse are legally separated. If separated, provide copy of separation document. SBA's regulations state that to be considered economically disadvantaged for purposes of the 8(a) Business Development Program, an individual must have an adjusted gross income averaged over the three prior fiscal years of \$350,000 or less; less than \$6 million in the fair market value of all assets (to include primary residence and value of the business concern); and less than \$750,000 in personal net worth (excluding equity interest in the personal residence and ownership interest in the business, and funds invested in a retirement account that are unavailable until retirement age). 13 C.F.R. §124.104. Note: Please complete this form with Personal Information not Business Information and divide all jointly owned assets and liabilities, as appropriate with spouse or others. The information contained in this form must be submitted and certified through certify.sba.gov . For additional information go to: http://www.sba.gov/8abd

Name	Business Phone (xxx-xxx-xxxx)
Home Address	Home Phone (xxx-xxx-xxxx)
City, State, & Zip Code	
Business Name of Applicant/Borrower	
Business Address (if different than home address)	
Business Type: ___ Corporation ___ S-Corp. ___ LLC ___ Partnership ___ Sole Proprietor (does not apply to ODA applicant)	
This information is current as of [month/day/year] (within 90 days of submission for 7(a)/504/SBG/ODA/WOSB or within 30 days of submission for 8(a) BD)	
WOSB applicant only, Married ___ Yes ___ No	

ASSETS	LIABILITIES
(Omit Cents)	(Omit Cents)
Cash on Hand & in banks..... _____	Accounts Payable..... _____
Savings Accounts..... _____	Notes Payable to Banks and Others..... _____ (Describe in Section 2)
IRA or Other Retirement Account..... _____ (Describe in Section 5)	Installment Account (Auto)..... _____ Mo. Payments _____
Accounts & Notes Receivable..... _____ (Describe in Section 5)	Installment Account (Other)..... _____ Mo. Payments _____
Life Insurance – Cash Surrender Value Only..... _____ (Describe in Section 8)	Loan(s) Against Life Insurance..... _____
Stocks and Bonds..... _____ (Describe in Section 3)	Mortgages on Real Estate..... _____ (Describe in Section 4)
Real Estate..... _____ (Describe in Section 4)	Unpaid Taxes..... _____ (Describe in Section 6)
Automobiles..... _____ (Describe in Section 5, and include Year/Make/Model)	Other Liabilities..... _____ (Describe in Section 7)
Other Personal Property..... _____ (Describe in Section 5)	Total Liabilities..... _____
Other Assets..... _____ (Describe in Section 5)	Net Worth..... _____
Total _____	Total _____ Must equal total in assets column.

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 should not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income)

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

Names and Addresses 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 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 attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Real Estate (e.g. Primary Residence, Other Residence, Rental Property, Land, etc.)			
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 the SBA/Lender/Surety Company 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 and the spouse of any 20% or more owner when spousal assets are included)

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 or Surety Companies will rely on this information when making decisions regarding an application for a loan, surety bond, or participation in the WOSB or 8(a) BD program. I further certify that I have read the attached statements required by law and executive order.-

Signature _____

Date _____

Print Name _____

Social Security No. _____

Signature _____

Date _____

Print Name _____

Social Security No. _____

NOTICE TO 7(a) LOAN, 504 LOAN AND SURETY BOND 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 or surety bond application. 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 thirty years and/or a fine of not more than \$1,000,000. Additionally, false statements can lead to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729, and other administrative remedies including suspension and debarment.

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

Whoever wrongfully misapplies the proceeds of an SBA disaster loan shall be civilly liable to the Administrator in an amount equal to one-and-one half times the original principal amount of the loan under 15 U.S.C. § 636(b). In addition, any false statement or misrepresentation to SBA may result in criminal, civil or administrative sanctions including, but not limited to: 1) fines and imprisonment, or both, under 15 U.S.C. § 645, 18 U.S.C. § 1001, 18 U.S.C. § 1014, 18 U.S.C. § 1040, 18 U.S.C. § 3571, and any other applicable laws; 2) treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729; 3) double damages and civil penalties under the Program Fraud Civil Remedies Act, 31 U.S.C. § 3802; and 4) suspension and/or debarment from all Federal procurement and non-procurement transactions. Statutory fines may increase if amended by the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015.

NOTICE TO APPLICANTS OR PARTICIPANTS IN THE WOSB FEDERAL CONTRACTING PROGRAM: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Any person who misrepresents a business concern's status as a WOSB or EDWOSB, or makes any other false statement in order to influence the WOSB Program eligibility determination or other review process in any way (e.g., protest), 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.

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

Any person who misrepresents a business concern's status as an 8(a) BD 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 treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729; (4) subject to administrative remedies, including suspension and debarment; and (5) ineligible for participation in programs conducted under the authority of the Small Business Act.

PLEASE NOTE: According to the Paperwork Reduction Act, you are not required to respond to this request for information unless it displays a valid OMB Control Number. The estimated average burden hours for the completion of this form is 1.5 hour per response. If you have questions or comments concerning this estimate or any other aspect of this information collection, please contact: Director, Records Management Division, Small Business Administration, 409 Third Street SW, Washington, D.C. 20416, and SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. PLEASE DO NOT SEND COMPLETED FORMS TO OMB.

PLEASE READ, DETACH, AND RETAIN FOR YOUR RECORDS

Privacy Act (5 U.S.C. 552a) and Debt Collection Improvement Act (31 U.S.C. 7701)

Authorities and Purpose for Collecting Information: SBA is collecting the information on this form, including social security numbers and other personal information, to make a character and credit or other eligibility decision in connection with you or your company's application for SBA assistance. SBA may also use social security numbers for the purpose of collecting and reporting on any delinquent fees or other amounts owed SBA, where applicable.

For purposes of SBA's financial assistance programs, 31 U.S.C. 7701 requires loan applicants and guarantors, or any indemnitor of a surety bond to provide their social security numbers, or other taxpayer identification numbers. Failure to provide this information would affect your ability to obtain an SBA loan or bond. For other individuals signing this form, the submission of the social security number is voluntary and failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. However, your social security number or other taxpayer identification number helps SBA to distinguish you from other individuals with the same or similar name or other personal identifier. This use is permitted under Executive Order 9397. Personal information collected is protected to the extent permitted by law, including the Freedom Information Act, 5 U.S.C. 552, and the Privacy Act 5 U.S.C. 552. Such information is maintained pursuant to SBA's Privacy Act System of Records at <https://www.sba.gov/sites/default/files/2020-01/sba-sorns.pdf>.

Right to Financial Privacy Act of 1978 (12 U.S.C. 3401) -- This is notice to you as required by the Right to Financial Privacy Act of 1978, of SBA's access rights to financial records held by financial institutions that are or have been doing business with you or your business, including any financial institutions participating in a loan or loan guaranty. The law provides that SBA shall have a right of access to your financial records in connection with its consideration or administration of assistance to you in the form of a Government guaranteed loan or guaranteed bond. SBA is required to provide a certificate of its compliance with the Act to a financial institution in connection with its first request for access to your financial records, after which no further certification is required for subsequent accesses. The law also provides that SBA's access rights continue for the term of any approved loan guaranty agreement or any approved bond agreement. No further notice to you of SBA's access rights is required during the term of any such agreement. The law also authorizes SBA to transfer to another Government authority any financial records included in an application for a loan or bond guarantee, or concerning an approved loan or loan guarantee or bond guarantee, as necessary to process, service or foreclose on a loan guaranty or collect on a defaulted loan guaranty, or to process or service the bond guarantee. No other transfer of your financial records to another Government authority will be permitted by SBA except as required or permitted by law.

Freedom of Information Act (5 U.S.C. 552)

This law provides, with some exceptions, that SBA must supply information contained in agency files and records to a person requesting it. Information about approved loans that will be automatically released includes, among other things, statistics on our loan programs (individual borrowers are not identified in the statistics), and other information such as the names of the borrowers (and their officers, directors, stockholders or partners), the collateral pledged to secure the loan, the amount of the loan, its purpose in general terms, and the maturity. With respect to SBA's bond guarantee program, SBA will release, among other things, statistics on the Surety Bond Guarantee (SBG) programs and other information such as the names of small businesses (and their officers, directors, stockholders or partners) and the amount of the bond guarantees. Proprietary data on a borrower would not routinely be made available to third parties. All requests under this Act are to be addressed to the nearest SBA office and be identified as a Freedom of Information request.

MANAGEMENT RESUME

GENERAL INFORMATION

First Name:		Middle/Maiden Name:		Last Name:	
Social Security Number:		Date of Birth:		Place of Birth:	
U.S. Citizenship Status:		Yes No		If no, Alien Registration #:	
Present Home Address:				From:	To:
Immediate Past Address:				From:	To:
Residence Phone #:			Business Phone #:		
Spouse's First Name:		Spouse's Middle/Maiden Name:		Spouse's Last Name:	
Social Security Name:		Date of Birth:		Place of Birth:	

EMPLOYMENT HISTORY (last 10 years)

From:	To:	Employer:	Location:
Duties:			
From:	To:	Employer:	Location:
Duties:			
From:	To:	Employer:	Location:
Duties:			
From:	To:	Employer:	Location:
Duties:			

YOUR FORMAL EDUCATION CONSISTS OF

High School:		Years:
College:	Degree:	Years:
Military History Branch:	Served From	Served To:

I am aware that this information is used to determine my eligibility for a loan, and that, if my application is approved, you may contact these sources to update this information at any time.

Applicant's Signature: _____

Date: _____

STATEMENT OF OFFENSE

Complete this form separately for each derogatory item disclosed on the Application Form.

Principal Name:

Date of Offense:

City and State or County and State where offense occurred:
Specific Charge (e.g DUI, assault, forgery, etc):
Disposition of Charge (fines, class/workshop, jail time, probation, registration as an offender etc.):
Have all court conditions been satisfied (court documents must be attached):

Applicant's Signature:

Date:

I hereby authorize FSB Small Business Lending, First Savings Bank, or any of its affiliate entities (collectively “Lender”) to obtain any and all information they may require and/or deem appropriate, at any time, including but not limited to, pre application and throughout the course of this transaction for any purpose related to my loan request/inquiry and process. I understand that by completing pages 1-15 of this document, I am making an inquiry as to a potential commercial loan. This inquiry will only be considered a complete application upon the submission of all supporting documentation noted as required on pages 17 and 18. I also understand you will not return this document. I understand that my credit profile will be obtained from Experian and reviewed by Lender. The initial soft credit pull upon completion of application for the purpose of obtaining additional information relative only to this credit transaction. I understand that by providing my signature below, I am providing ‘written instructions’ to Lender under the Fair Credit Reporting Act authorizing Lender to obtain information from my personal credit profile and/or any and all other related information from Experian. I authorize Lender to obtain such information solely to conduct a prequalification for the purpose of potentially extending commercial credit.

I hereby certify that the enclosed information (plus any attachments or exhibits) is valid and correct to the best of my knowledge. I also certify all financial and character information provided is true and accurate. I authorize the release of all such information to the Lender and further authorize the release of such information to any entity they deem necessary for any purpose related to my credit transaction with them.

I understand that the Lenders will require a subsequent hard credit pull by Lender from a consumer reporting agency if a conditional approval is granted. I hereby acknowledge that all conditional approvals will be in writing and subject to the terms and conditions set forth by a Credit Analyst of the Lender. I understand that I will be given the opportunity to review the written conditional approval prior to authorizing any subsequent hard credit pull.

APPLICANT

Signature:
Print Full Legal Name:
Social Security Number:
Street Address:
City, State, Zip Code:
Applicant #1 Date of Birth:

SPOUSE

Signature:
Print Full Legal Name:
Social Security Number:
Street Address:
City, State, Zip Code:
Applicant #2 Date of Birth:

NOTICE TO APPLICANTS:

If your application for business credit is denied, you have the right to a written statement of the specific reason for denial. FSB Small Business Lending will send such a written statement to you at the email address provided in your application. You may also obtain a statement by contacting FSB Small Business Lending at aahelp@fsbbank.net or 702 North Shore Dr, Ste 300, Jeffersonville, IN 47130 within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

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 the creditor is Federal Reserve Consumer Help, PO Box 1200, Minneapolis, MN 55480.

BUSINESS FINANCIAL INFORMATION

- Last three years business tax returns (operating company/holding company/all affiliates)
- Year-End Profit & Loss Statement
- Year-End Balance Sheet
- Accounts Receivable aging
- Accounts Payable aging
- Year-to-date Profit & Loss statement (plus same time period for prior year)
(operating company/holding company/all affiliates)
- Year-to-date Balance Sheet (plus same time period for prior year) (operating company/holding company/all affiliates)
- Business debt schedule
- Detailed Business Plan
- Three years of detailed Projections with significant assumptions (if startup or business acquisition)

PERSONAL INFORMATION

- Last three years of personal tax returns (all owners)
- Include all K-1 statements
- Personal financial statement
- Personal Resume
- SBA Form 1919 (to be provided)

OTHER INFORMATION (AS APPLICABLE)

Borrower

- Equipment List
- Existing Lease Agreements
- Filed Articles of Organization or Incorporation
- By-Laws or Operating Agreements
- Current business checking account statement

Franchises

- Copy of proposed franchise agreement or letter of approval from franchisor
- Franchise Disclosure Document (FDD)

Gas Stations

- 3 years gallonage report
- YTD gallonage report
- Fuel Supply Agreement
- Breakdown of revenue into gas/non-gas line items

Export

- Export Questionnaire
- Export Business Plan including export sales projection and supporting rationale (product/services to be exported, countries to which business will export)
- Explanation of how loan proceeds will enable entering into a new or expanding existing export market
- For indirect, a letter or related doc from customer certifying intention to sell to foreign buyer

DOCUMENTS SPECIFIC TO LOAN PURPOSE (AS APPLICABLE)

Commercial Real Estate Purchase

- Purchase Contract (including all extensions, exhibits, and addenda)

Change of Ownership

- Purchase Agreement/Letter of Intent (LOI)
- 2 years Projections (first year by month) w/explanations of assumptions
- Business plan, including transition summary

Equipment Purchase

- Invoices, Quotes, or Estimates

Debt Refinance

- Copies of all Notes Payable requested to be refinanced here (include all extensions and addenda)

Construction

- Draft contract, to include soft costs
- Project budget detailed with necessary permits and estimated timelines