

# BUSINESS CREDIT APPLICATION

APPLICANT NAME AND BUSINESS ADDRESS		LENDER NAME AND ADDRESS	
SOCIAL SECURITY OR TAX I.D. NUMBER	CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LLC <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/>	BUSINESS PHONE NUMBER	E-MAIL ADDRESS
BRIEF DESCRIPTION OF BUSINESS		OWNERSHIP OF BUSINESS	
AMOUNT OF LOAN REQUESTED	PURPOSE OF LOAN		
REQUESTED REPAYMENT TERMS		SOURCE(S) OF FUNDS TO REPAY LOAN	
DESCRIPTION AND OWNERSHIP OF COLLATERAL OFFERED			

OFFICERS OR PRINCIPALS			
NAME	TITLE	HOME ADDRESS	HOME PHONE NUMBER

OUR PRINCIPAL FINANCIAL INSTITUTION IS:	SERVICES PRESENTLY USED: <input type="checkbox"/> Checking Account <input type="checkbox"/> Safe Deposit <input type="checkbox"/> Loan <input type="checkbox"/> Savings Account <input type="checkbox"/> Cert. of Deposit	OTHER FINANCIAL INSTITUTIONS USED:
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OUTSTANDING DEBTS OF APPLICANT (List All)				
TO WHOM DUE - INDICATE ADDRESS	DATE OF NOTE	ORIGINAL DEBT	INT. RATE	BALANCE DUE

A complete, current and **signed** Financial Statement of Applicant must be attached. (Additional data and income information may also be required.)

SIGNATURE		
APPLICANT'S SIGNATURE	TITLE	DATE

Everything stated in this Application and the Financial Statement of the Applicant attached hereto is correct to the best of undersigned Applicant's knowledge. It is understood that you will retain this Application whether or not it is approved. You are authorized to check credit and business experience and to answer questions about your credit experience with Applicant.