



SMALL BUSINESS LOAN INSTRUCTIONS AND APPLICATION

EACH ADDITIONAL PRINCIPAL OF THE BORROWING ENTITY OWNING A 20% OR GREATER PORTION OF THE COMPANY SHOULD COMPLETE A SEPARATE PERSONAL INFORMATION PACKAGE AVAILABLE FROM YOUR BUSINESS DEVELOPMENT OFFICER.

WWW.MWRBANK.COM

This checklist has been provided to assist you in gathering the necessary information for the **credit evaluation** of your loan request. Please note that all items must contain an original signature and date. **Complete** information will be necessary to process your application. If you have any questions about the forms or require assistance in completing them, please contact your Business Development Officer.

A. Midwest Regional Bank Financial Loan Application (enclosed) including:

- 1. Loan Application Form
- 2. History of Business Form

B. Business Financial Exhibits:

- 1. **Business Financial Statements for three (3) prior years**, including Balance Sheets and Profit & Loss Statements, for existing business & any affiliates. (An affiliate is primarily defined as any entity that is controlled by the applicant, its' stockholders, managers or directors or has control of the applicant business either through common ownership, management, previous relationships with or ties to another concern, and contractual relationships.)
- 2. **Federal Tax Returns for three (3) prior years** including all statements and schedules for existing business & any affiliates.
- 3. **Interim Profit & Loss, and Balance Sheet**- Within 45 days old for business being: 1) acquired, 2) existing/expanded, and 3) affiliates.
- 4. **Business Debt Schedule** (form enclosed) - Notes payable summary for existing business.
- 5. **Aging of Accounts Receivable and Accounts Payable Summary** (corresponding to dates of interim financial statements) - Please attach current internally generated A/R and A/P aging. (Include for affiliate business as well.)
- 6. **Business Projections** (form available from your Business Development Officer, if needed) for new or expanding businesses - Include a description of management, feasibility analysis, assumptions, site evaluation, and demographics.
- 7. **Business Plan** (for new businesses or as requested)

C. Personal Financial Exhibits:

- 1. **Personal Financial Statement** (form enclosed) Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest & each general partner, or (3) each stockholder owning 20% or more voting stock & each corporate officer and director, or (4) other person or entity providing a guaranty on the loan. *(Please include the resources of spouse and any dependent children.)*
- 2. **Statement of Personal History – SBA Form 912** (form enclosed) one each completed by all principals owning 20% or more interest in the borrowing entity and key managers, directors and/or officers.
- 3. **Management Resume** (form enclosed) Provide complete resumes on all individuals owning 20% or more interest in the borrowing entity including key managers (copy form as needed).
- 4. **Personal Federal Tax Returns for three (3) prior years** including all statements and schedules - for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest & each general partner, or (3) each stockholder owning 20% or more voting stock & each corporate officer and director, or (4) other person or entity providing a guaranty on the loan.
- 5. **Signed Authorization to Release Information** (form enclosed) - Signed by all principals having 20% or more ownership interest in borrowing entity.
- 6. **Written Explanation of any derogatory credit items.** – If you know of any derogatory items that may appear on your personal credit report, please include a written explanation along with any supporting documentation.

PLEASE NOTE: The *Personal Financial Exhibits* must be provided for (1) each proprietor, or (2) each limited partner who owns 20% or more interest & each general partner, or (3) each stockholder owning 20% or more voting stock & each corporate officer and director, or (4) other person or entity providing a guaranty on the loan. If applicable, contact your Business Development Officer for a *Personal Financial Exhibit* packet. **Please be sure that all items contain an original signature and date.**

D. Miscellaneous Documents Required (as applicable):**For Commercial Real Estate loans...**

- 1. **Purchase Contract/Buy-Sell Agreement**
- 2. **New Construction** – Provide copy of the construction contract (a draft is acceptable) and a copy of the plans & specifications for the proposed project. If your project is in the early stages of development, please provide a preliminary cost analysis.
- 3. **Refinancing** – Provide a copy of the notes and deeds on the real estate to be refinanced.
- 4. **Environmental Questionnaire** (form enclosed) – consult with your Business Development Officer.
- 5. **IRS Form 4506- T – “Request for Copy or Transcript of Tax Returns”** – executed form required for operating business. *(Form included at the end of this application packet.)*

For Business Acquisition Loans...

- 6. A copy of the proposed **Purchase & Sale Agreement or Letter of Intent** – complete with allocation of monies, signatures, exhibits and addendums
- 7. **Federal Tax Returns on Seller’s Business for three (3) prior years** including all statements and schedules for existing business & any affiliates.
- 8. **Business Financial Statements on Seller’s Business** – complete Balance sheets and Profit & Loss statement of business to be acquired for the most recent last three fiscal years.

For Business Acquisition Loans (continued) ...

- 9. Interim Profit & Loss, and Balance Sheet-** complete Balance sheets and Profit & Loss statement of business to be acquired, current within 45 days. .
- 10. IRS Form 4506- T – “Request for Copy or Transcript of Tax Returns”** prepared for selling business and signed by seller. *(Form included at the end of this application packet.)*

For Business Equipment Loans...

- 11. Purchase Orders, Invoices or Quotes** – with details about the equipment to be financed
- 12. Refinancing** – complete list of equipment to be refinanced, including model and serial numbers, estimated date of manufacture, and estimated useful life. If original invoices are available, please include a copy as well as copy of the existing note(s) and security agreements to be refinanced.
- 13. IRS Form 4506- T – “Request for Copy or Transcript of Tax Returns”** – executed form required for operating business. *(Form included at the end of this application packet.)*

For Hotel/Hospitality Loans...

- 14. Smith Travel Research Report (aka STAR Report)** – with details about the hotel’s occupancy rates, average daily rates, REVPAR, etc.; current within 60 days. Must include data on subject hotel as well as competitors.
- 15. Quality Assurance Report (QAR) from Franchisor** – please provide most recent QAR on subject location including condition report on interior and exterior.

Other ...

- 16. Copy of Proposed Franchise Agreement or Letter of Approval from Franchisor** (*franchise business only)
- 17. Franchise Disclosure Document** (formerly UFOC) - provide a copy of the most current version of these documents.
- 18. Lease(s)** – complete copies of all existing or proposed leases.
- 19. IRS Form 4506- T – “Request for Copy or Transcript of Tax Returns”** – executed form required for operating business. *(Form included at the end of this application packet.)*

APPLICANT COMPANY
Contact Numbers

Legal Business Name: _____ Phone: _____

dba name (if applicable): _____ Fax: _____

Address: _____ Cell: _____

City: _____ State: _____ Zip: _____

Primary Contact: _____ Email: _____

 Type of Entity: Corporation (S-Corp C-Corp LLC)

 Sole Proprietorship No. of Employees: _____ Existing: _____

 General Partnership After this Financing: _____

 Limited Partnership Affiliates: _____

Date Established: _____ Date Incorporated: _____ State of Incorporation: _____

Employer Tax I.D.: _____ Name of Franchise (if applicable) _____

Website: _____ Name & Address of Current Bank _____

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.

Name	Name
Individual Name	Individual Name
Address	Address
City, State, Zip	City, State, Zip
Telephone	Telephone
Percent of Ownership	Percent of Ownership

(If additional affiliates, please attach on separate sheet)

INSURANCE INFORMATION

	Company	Contact	Phone #
Hazard/Property Insurance	_____		
Life Insurance	_____		

ADDITIONAL INFORMATION

1. Have you or any officer of your company ever been involved in bankruptcy or insolvency proceedings? Yes* No
2. Are you or your business involved in any pending lawsuits? Yes* No
3. Does any applicant or their spouse or any member of their household, or any one who owns, manages or directs your business or their spouses or members of their households, work for the Small Business Administration, Small Business Advisory Council, SCORE or ACE, any Federal Agency, or the participating lender? Yes* No
4. Does your business presently, or will it as a result of this loan, engage in export trade? Yes* No
5. Does the company or any owner own title to a patented, trademarked, or copyrighted product? Yes* No
6. Do you currently have or have you ever applied or received any previous or existing SBA or other Federal Government Debt? If Yes, please provide details: Yes* No

LIFE INSURANCE

7. Does the company maintain Life Insurance on any owner or officer? Yes* No
**If YES, please provide the details below*

Insured _____ Beneficiary _____ Amount \$ _____

Insured _____ Beneficiary _____ Amount \$ _____

ESTIMATED PROJECT COSTS

Land Purchase	\$	_____
Real Estate Purchase/New Building Construction	\$	_____
Construction Contingency/Overruns	\$	_____
Leasehold Improvements/Repairs	\$	_____
Interim Interest	\$	_____
Equipment Purchase	\$	_____
Working Capital (including Accounts Payable & Inventory)	\$	_____
Business Acquisition	\$	_____
Refinance Debt	\$	_____
Estimated Closing Costs and Third Party Reports:		
Survey Fee (estimated)	\$	_____
Title Insurance (estimated)	\$	_____
Appraisal Fee (estimated)	\$	_____
Legal Fees (estimated)	\$	_____
Other: _____	\$	_____
Conventional/Interim Loan Fee	\$	_____
SBA Guarantee Fee	\$	_____
Other: _____	\$	_____
TOTAL ESTIMATED PROJECT AMOUNT	\$	0
LESS OWN CASH/EQUITY TO BE INJECTED	\$	_____
TOTAL LOAN REQUESTED FOR PROJECT	\$	0

HISTORY OF BUSINESS FORM

A MIDWEST REGIONAL BANK FINANCIAL ANALYST WILL CONTACT YOU TO FURTHER DISCUSS THE FOLLOWING ITEMS:

BACKGROUND AND 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 SERIVE? *i.e. 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.

PRIMARY COMPETITORS *(Who do you compete with, where are they located and what is your competitive advantage?)*

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.*

Applicant's Signature _____

Company Name:

Date:

This schedule should list loans, contracts and notes payable, not accounts payable or accrued liabilities. It should correspond to your interim balance sheet. If no debt, fill out the top portion and write "NONE" in the section below and sign it at the bottom.

Creditor Name & Address	Original Date	Original Amount	Present Balance	Interest Rate	Monthly Payment	Maturity Date	Collateral/Security	Current Status?
Totals:								

Applicant Signature: _____



**PERSONAL FINANCIAL STATEMENT
 7(a) / 504 LOANS AND SURETY BONDS**

U.S. SMALL BUSINESS ADMINISTRATION

As of _____, _____

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 application for an SBA guaranteed 7(a) or 504 loan or a guaranteed surety.

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:

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 guaranty

Name	Business Phone
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Home Address	Home Phone
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City, State, & Zip Code

Business Name of Applicant

ASSETS (Omit Cents)	LIABILITIES (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)

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 or a surety bond. 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 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.

PLEASE NOTE: The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have 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 officer, paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503. PLEASE DO NOT SEND FORMS TO OMB.

PLEASE READ, DETACH, AND RETAIN FOR YOUR RECORDS
STATEMENTS REQUIRED BY LAW AND EXECUTIVE ORDER

SBA is required to withhold or limit financial assistance, to impose special conditions on approved loans, to provide special notices to applicants or borrowers and to require special reports and data from borrowers in order to comply with legislation passed by the Congress and Executive Orders issued by the President and by the provisions of various inter-agency agreements. SBA has issued regulations and procedures that implement these laws and executive orders. These are contained in Parts 112, 113, and 117 of Title 13 of the Code of Federal Regulations and in Standard Operating Procedures.

Privacy Act (5 U.S.C. 552a)

Any person can request to see or get copies of any personal information that SBA has in his or her file when that file is retrieved by individual identifiers such as name or social security numbers. Requests for information about another party may be denied unless SBA has the written permission of the individual to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act.

Under the provisions of the Privacy Act, you are not required to provide your social security number. Failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. Disclosures of name and other personal identifiers are, however, required for a benefit, as SBA requires an individual seeking assistance from SBA to provide it with sufficient information for it to make a character determination. In determining whether an individual is of good character, SBA considers the person's integrity, candor, and disposition toward criminal actions. Additionally, SBA is specifically authorized to verify your criminal history, or lack thereof, pursuant to section 7(a)(1)(B), 15 USC Section 636(a)(1)(B) of the Small Business Act (the Act). Further, for all forms of assistance, SBA is authorized to make all investigations necessary to ensure that a person has not engaged in acts that violate or will violate the Act or the Small Business Investment Act, 15 USC Sections 634(b)(11) and 687(b)(a), respectively. For these purposes, you are asked to voluntarily provide your social security number to assist SBA in making a character determination and to distinguish you from other individuals with the same or similar name or other personal identifier.

The Privacy Act authorizes SBA to make certain "routine uses" of information protected by that Act. One such routine use is the disclosure of information maintained in SBA's investigative files system of records when this information indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature. Specifically, SBA may refer the information to the appropriate agency, whether Federal, State, local or foreign, charged with responsibility for, or otherwise involved in investigation, prosecution, enforcement or prevention of such violations. Another routine use is disclosure to other Federal agencies conducting background checks; only to the extent the information is relevant to the requesting agencies' function. See, 74 F.R. 14890 (2009), and as amended from time to time for additional background and other routine uses.

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. 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. 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 a application for a loan, or concerning an approved loan or loan guarantee, as necessary to process, service or foreclose on a loan guaranty or collect on a defaulted loan guaranty.

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

This law provides, with some exceptions, that SBA must supply information reflected 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. 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.

Flood Disaster Protection Act (42 U.S.C. 4011) -- Regulations have been issued by the Federal Insurance Administration (FIA) and by SBA implementing this Act and its amendments. These regulations prohibit SBA from making certain loans in an FIA designated floodplain unless Federal Flood insurance is purchased as a condition of the loan. Failure to maintain the required level of flood insurance makes the applicant ineligible for any financial assistance from SBA, including disaster assistance.

Executive Orders -- Floodplain Management and Wetland Protection (42 F.R. 26951 and 42 F.R. 26961) – SBA discourages settlement in or development of a floodplain or a wetland. This statement is to notify all SBA loan applicants that such actions are hazardous to both life and property and should be avoided. The additional cost of flood preventive construction must be considered in addition to the possible loss of all assets and investments due to a future flood.

Occupational Safety and Health Act (15 U.S.C. 651 et seq.) -- This legislation authorizes the Occupational Safety and Health Administration in the Department of Labor to require businesses to modify facilities and procedures to protect employees or pay penalty fees. Businesses can be forced to cease operations or be prevented from starting operations in a new facility. Therefore, SBA may require additional information from an applicant to determine whether the business will be in compliance with OSHA regulations and allowed to operate its facility after the loan is approved and disbursed. Signing this form as an applicant is certification that the OSHA requirements that apply to the applicant business have been determined and that the applicant, to the best of its knowledge, is in compliance. Furthermore, applicant certifies that it will remain in compliance during the life of the loan.

Civil Rights Legislation -- All businesses receiving SBA financial assistance must agree not to discriminate in any business practice, including employment practices and services to the public on the basis of categories cited in 13 C.F.R., Parts 112, 113, and 117 of SBA Regulations. This includes making their goods and services available to handicapped clients or customers. All business borrowers will be required to display the "Equal Employment Opportunity Poster" prescribed by SBA.

Equal Credit Opportunity Act (15 U.S.C. 1691) -- 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 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 program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act.

Executive Order 11738 -- Environmental Protection (38 F.R. 251621) -- The Executive Order charges SBA with administering its loan programs in a manner that will result in effective enforcement of the Clean Air Act, the Federal Water Pollution Act and other environment protection legislation.

Debt Collection Act of 1982, Deficit Reduction Act of 1984 (31 U.S.C. 3701 et seq. and other titles) -- These laws require SBA to collect aggressively any loan payments which become delinquent. SBA must obtain your taxpayer identification number when you apply for a loan. If you receive a loan, and do not make payments as they come due, SBA may take one or more of the following actions: (1) report the status of your loan(s) to credit bureaus, (2) hire a collection agency to collect your loan, (3) offset your income tax refund or other amounts due to you from the Federal Government, (4) suspend or debar you or your company from doing business with the Federal Government, (5) refer your loan to the Department of Justice or other attorneys for litigation, or (6) foreclose on collateral or take other action permitted in the loan instruments.

Immigration Reform and Control Act of 1986 (Pub. L. 99-603) -- If you are an alien who was in this country illegally since before January 1, 1982, you may have been granted lawful temporary resident status by the United States Immigration and Naturalization Service pursuant to the Immigration Reform and Control Act of 1986. For five years from the date you are granted such status, you are not eligible for financial assistance from the SBA in the form of a loan guaranty under Section 7(a) of the Small Business Act unless you are disabled or a Cuban or Haitian entrant. When you sign this document, you are making the certification that the Immigration Reform and Control Act of 1986 does not apply to you, or if it does apply, more than five years have elapsed since you have been granted lawful temporary resident status pursuant to such 1986 legislation.

Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4821 et seq.)

Borrowers using SBA funds for the construction or rehabilitation of a residential structure are prohibited from using lead-based paint (as defined in SBA regulations) on all interior surfaces, whether accessible or not, and exterior surfaces, such as stairs, decks, porches, railings, windows and doors, which are readily accessible to children under 7 years of age. A "residential structure" is any home, apartment, hotel, motel, orphanage, boarding school, dormitory, day care center, extended care facility, college or other school housing, hospital, group practice or community facility and all other residential or institutional structures where persons reside.

Executive Order 12549, Debarment and Suspension 2 CFR 2700

1. The borrower or contractor certifies, by submission of its application for an SBA loan or bond guarantee, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
2. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participants shall attach an explanation to the application.



United States of America
SMALL BUSINESS ADMINISTRATION
STATEMENT OF PERSONAL HISTORY

Please Read Carefully: SBA uses Form 912 as one part of its assessment of program eligibility. Please reference SBA Regulations and Standard Operating Procedures if you have any questions about who must submit this form and where to submit it. For further information, please call SBA's Answer Desk at 1-800-U-ASK-SBA (1-800-827-5722), or check SBA's website at www.sba.gov. **DO NOT SEND COMPLETED FORMS TO OMB as this will delay the processing of your application; send forms to the address provided by your lender or SBA representative.**

Name and Address of Applicant (Firm Name)(Street, City, State, and ZIP Code)		SBA District/Disaster Area Office	
Amount Applied for (when applicable)	File No. (if known)		

1. Personal Statement of: (State name in full, if no middle name, state (NMN), or if initial only, indicate initial.) List all former names used, and dates each name was used. Use separate sheet if necessary. First _____ Middle _____ Last _____	2. Give the percentage of ownership or stock owned or to be owned in the small business or the development company Social Security No. _____	3. Date of Birth (Month, day, and year) _____ 4. Place of Birth: (City & State or Foreign Country) _____
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Name and Address of participating lender or surety co. (when applicable and known)	5. U.S. Citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO INITIALS: _____ If No, are you a Lawful Permanent resident alien: <input type="checkbox"/> YES <input type="checkbox"/> NO If non- U.S. citizen provide alien registration number: _____
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6. Present residence address: From: _____ To: _____ Address: _____ Home Telephone No. (Include Area Code): _____ Business Telephone No. (Include Area Code): _____	Most recent prior address (omit if over 10 years ago): From: _____ To: _____ Address: _____
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PLEASE SEE REVERSE SIDE FOR EXPLANATION REGARDING DISCLOSURE OF INFORMATION AND THE USES OF SUCH INFORMATION.

YOU MUST INITIAL YOUR RESPONSES TO QUESTIONS 5,7,8 AND 9.

IF YOU ANSWER "YES" TO 7, 8, OR 9, FURNISH DETAILS ON A SEPARATE SHEET. INCLUDE DATES, LOCATION, FINES, SENTENCES, WHETHER MISDEMEANOR OR FELONY, DATES OF PAROLE/PROBATION, UNPAID FINES OR PENALTIES, NAME(S) UNDER WHICH CHARGED, AND ANY OTHER PERTINENT INFORMATION. AN ARREST OR CONVICTION RECORD WILL NOT NECESSARILY DISQUALIFY YOU; HOWEVER, AN UNTRUTHFUL ANSWER WILL CAUSE YOUR APPLICATION TO BE DENIED AND SUBJECT YOU TO OTHER PENALTIES AS NOTED BELOW.

7. Are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction?
 Yes No **INITIALS:** _____

8. Have you been arrested in the past six months for any criminal offense?
 Yes No **INITIALS:** _____

9. For any criminal offense – other than a minor vehicle violation – have you ever: 1) been convicted; 2) plead guilty; 3) plead nolo contendere; 4) been placed on pretrial diversion; or 5) been placed on any form of parole or probation (including probation before judgment).
 Yes No **INITIALS:** _____

10. I authorize the Small Business Administration Office of Inspector General to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act, and the Small Business Investment Act.

CAUTION - PENALTIES 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, surety bond, or other program participation. A false statement is punishable under 18 USC 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 USC 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, under 18 USC 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000.

Signature _____	Title _____	Date _____
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Agency Use Only 11. <input type="checkbox"/> Fingerprints Waived _____ Date _____ Approving Authority _____ <input type="checkbox"/> Fingerprints Required _____ Date _____ Approving Authority _____ Date Sent to OIG _____	12. <input type="checkbox"/> Cleared for Processing _____ Date _____ Approving Authority _____ 13. <input type="checkbox"/> Request a Character Evaluation _____ Date _____ Approving Authority _____ (Required whenever 7, 8 or 9 are answered "yes" even if cleared for processing.)
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PLEASE NOTE: The estimated burden for completing this form is 15 minutes per response. You are not required to respond to any collection of information unless it displays a currently valid OMB approval number. If you wish to submit comments on the burden for completing this form, direct these comments to U.S. Small Business Administration, Chief, AIB, 409 3rd St., S.W., Washington D.C. 20416 and Desk Officer for the Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. OMB Approval 3245-0178. **DO NOT SEND COMPLETED FORMS TO OMB as this will delay the processing of your application; send forms to the address provided by your lender or SBA representative.**

SBA FORM 912: STATEMENT OF PERSONAL HISTORY (Addendum B)

SBA Form 912 is required for every proprietor, general partner, officer, director, managing member of a limited liability company (LLC), owner of 20% or more of the equity of the Applicant, Trustor (if the Small Business Applicant is owned by a trust), and any person hired by the Applicant to manage day-to-day operations .

Lender Name: _____ **Phone:** _____
Street Address: _____
City, State, ZIP: _____

Principal Name: _____ **Phone:** _____
Street Address: _____
City, State, ZIP: _____

Charge 1: _____ **Felony** **Misdemeanor**
Month/Day/Year (if actual day unknown, then Month/Year: _____
City, County, State of Arrest: _____
Disposition of Charge (List Specific Details)
Sentence: _____
Fine: _____
Other: _____
Date Disposition Completed: _____

Charge 2: _____ **Felony** **Misdemeanor**
Month/Day/Year (if actual day unknown, then Month/Year: _____
City, County, State of Arrest: _____
Disposition of Charge (List Specific Details)
Sentence: _____
Fine: _____
Other: _____
Date Disposition Completed: _____

Charge 3: _____ **Felony** **Misdemeanor**
Month/Day/Year (if actual day unknown, then Month/Year: _____
City, County, State of Arrest: _____
Disposition of Charge (List Specific Details)
Sentence: _____
Fine: _____
Other: _____
Date Disposition Completed: _____

Signature: _____ **Date:** _____

NOTICES REQUIRED BY LAW

The following is a brief summary of the laws applicable to this solicitation of information.

Paperwork Reduction Act (44 U.S.C. Chapter 35)

SBA is collecting the information on this form to make a character and credit eligibility decision to fund or deny you a loan or other form of assistance. The information is required in order for SBA to have sufficient information to determine whether to provide you with the requested assistance. The information collected may be checked against criminal history indices of the Federal Bureau of Investigation.

Privacy Act (5 U.S.C. § 552a)

Any person can request to see or get copies of any personal information that SBA has in his or her file, when that file is retrieved by individual identifiers, such as name or social security numbers. Requests for information about another party may be denied unless SBA has the written permission of the individual to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act.

Under the provisions of the Privacy Act, you are not required to provide your social security number. Failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. Disclosures of name and other personal identifiers are, however, required for a benefit, as SBA requires an individual seeking assistance from SBA to provide it with sufficient information for it to make a character determination. In determining whether an individual is of good character, SBA considers the person's integrity, candor, and disposition toward criminal actions. In making loans pursuant to section 7(a)(6) the Small Business Act (the Act), 15 USC § 636 (a)(6), SBA is required to have reasonable assurance that the loan is of sound value and will be repaid or that it is in the best interest of the Government to grant the assistance requested. Additionally, SBA is specifically authorized to verify your criminal history, or lack thereof, pursuant to section 7(a)(1)(B), 15 USC § 636(a)(1)(B). Further, for all forms of assistance, SBA is authorized to make all investigations necessary to ensure that a person has not engaged in acts that violate or will violate the Act or the Small Business Investment Act, 15 USC §§ 634(b)(11) and 687b(a). For these purposes, you are asked to voluntarily provide your social security number to assist SBA in making a character determination and to distinguish you from other individuals with the same or similar name or other personal identifier.

When the information collected on this form indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature, SBA may refer it to the appropriate agency, whether Federal, State, local, or foreign, charged with responsibility for or otherwise involved in investigation, prosecution, enforcement or prevention of such violations. See 74 Fed. Reg. 14890 (2009) for other published routine uses.



AUTHORIZATION TO OBTAIN AND RELEASE INFORMATION

I/We hereby authorize Midwest Regional Bank to obtain any and all information they may require at any time for any purpose related to my/our credit transaction with Midwest Regional Bank or any of its affiliated lenders, including obtaining my/our personal credit history from a consumer reporting agency, and I/we authorize the release of all such information to Midwest Regional Bank or any of its affiliated lenders. I/We further authorize Midwest Regional Bank to release such information to any entity they deem necessary for any purpose related to my/our credit transaction with them.

I/We hereby certify that the enclosed information (plus any attachments or exhibits) is valid and correct to the best of my/our knowledge.

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 Midwest Regional Bank or any of its affiliated lenders.

Signature _____

Date _____

Social Security # _____

Date of Birth: _____

Home Address _____

City, St, Zip _____

Signature _____

Date _____

Social Security # _____

Date of Birth: _____

Home Address _____

City, St, Zip _____

Request for Transcript of Tax Return

- ▶ Do not sign this form unless all applicable lines have been completed.
- ▶ Request may be rejected if the form is incomplete or illegible.
- ▶ For more information about Form 4506-T, visit www.irs.gov/form4506t.

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946. 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, individual taxpayer identification number, or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
4 Previous address shown on the last return filed if different from line 3 (see instructions)	

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.

#300034 ID: seemasingh

C/O ACCUVERIFY.COM 45 FLOWER LN DRACUT MA 01826 978.223.2245

Caution: If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

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 1120-A, Form 1120-H, Form 1120-L, 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 10 business days
- c Record of Account**, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business 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 2011, filed in 2012, will likely not be available from the IRS until 2013. 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 10 business 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.

/	/	/	/
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Caution: Do not sign this form unless all applicable lines have been completed.

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, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, 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 the signature date.

Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-T. See instructions.

Phone number of taxpayer on line 1a or 2a

Sign Here	Signature (see instructions)	Date	
	Title (if line 1a above is a corporation, partnership, estate, or trust)		
	Spouse's signature	Date	

Section references are to the Internal Revenue Code unless otherwise noted.

Future Developments

For the latest information about Form 4506-T and its instructions, go to www.irs.gov/form4506t. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

General Instructions

Caution: Do not sign this form unless all applicable lines have been completed.

Purpose of form. Use Form 4506-T to request tax return information. You can also designate (on line 5) a third party to receive the information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

Note: If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

Tip. Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

Automated transcript request. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946.

Where to file. Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different addresses, send your request to the address based on the address of your most recent return.

Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If you filed an individual return and lived in:	Mail or fax to:
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	Internal Revenue Service RAIVS Team Stop 6716 AUSC Austin, TX 73301 512-460-2272
Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	Internal Revenue Service RAIVS Team Stop 37106 Fresno, CA 93888 559-456-7227
Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	Internal Revenue Service RAIVS Team Stop 6705 P-6 Kansas City, MO 64999 816-292-6102

Chart for all other transcripts

If you lived in or your business was in:	Mail or fax to:
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409 801-620-6922
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250 859-669-3592

Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.


Line 3. Enter your current address. If you use a P.O. box, include it on this line.

Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.

Note: If the addresses on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address. For a business address, file Form 8822-B, Change of Address or Responsible Party — Business.

Line 6. Enter only one tax form number per request.

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.

 You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed and returned to you if the box is unchecked.

Individuals. Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506-T but must provide documentation to support the requester's right to receive the information.

Partnerships. Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Note: If you are Heir at law, Next of kin, or Beneficiary you must be able to establish a material interest in the estate or trust.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

Signature by a representative. A representative can sign Form 4506-T for a taxpayer only if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5. The representative must attach Form 2848 showing the delegation to Form 4506-T.

Privacy Act and Paperwork Reduction Act Notice.

We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form**, 10 min.; **Preparing the form**, 12 min.; and **Copying, assembling, and sending the form to the IRS**, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service
Tax Forms and Publications Division
1111 Constitution Ave. NW, IR-6526
Washington, DC 20224

Do not send the form to this address. Instead, see *Where to file* on this page.

ENVIRONMENTAL QUESTIONNAIRE AND DISCLOSURE STATEMENT

This form is required if the financing request does not involve the purchase of or construction of commercial real estate. However, if commercial real estate (presently owned by the Applicant) is being refinanced or pledged as collateral on this loan request, the form is to be completed by the applicant and submitted to the Lender prior to submission of the application to the SBA. The applicant may wish to retain an engineer and/or attorney to assist in the completion of the questionnaire. Please note that this form must be completed for every property being pledged as collateral.

Applicant:		
Address and location of the property(ies):		
<p>The purpose of this questionnaire is to provide information about past and present ownership and uses of the real property(ies) upon which Lender will rely in deciding whether to extend credit. Please respond fully to all questions, including supporting documentary evidence where appropriate. If unable to answer, please respond "unknown" or "not applicable". Where space is inadequate to answer, please attach additional pages as needed. If applicant has an interest (leasehold or fee interest) and conducts business at multiple locations, a separate disclosure statement should be supplied for each location.</p>		
1. Uses of the Property(ies)		
The present owner(s) of the property:		
The present occupant(s) of the property:		
2. Emergency 24 hour contact (name, area code, phone):		
Name:		
Telephone Number:	Night:	Day:
3. The previous and present use (s) of the property:		
4. The previous and present use (s) of the adjacent properties:		
5. Has the real property or any adjacent property ever been used for industrial, manufacturing, refining, processing, or agricultural purposes? Yes or No? If yes, please describe.		
6. Date of the last transfer of ownership:		
Was pre-acquisition site assessment or environmental audit required?		
<input type="checkbox"/> No <input type="checkbox"/> Yes (If yes, include a copy of report)		
7. Previous owner:		
8. Previous facility name:		
9. When were buildings on the premises constructed?		
10. If buildings or improvements on premises were constructed prior to 1978, was asbestos used for insulation or other purposes?		
11. Are there disposal facilities or dump sites, storing or using hazardous waste/toxic materials within a 2000 foot radius from the property? <input type="checkbox"/> No <input type="checkbox"/> Yes (If yes, please describe)		

12. If the answer to question 11 is in the affirmative, disclose whether the

Environmental Protection Agency or State Department of Health Services (or other environmental authority) requires a permit for your occupancy of this property.

13. Does your business use chemicals or substances which require permits or licenses to own, use, or remove from the property? No or Yes (If yes, please describe)

14. Where on the premises and in what containers are those chemicals or substances located?

15. How are those chemicals or substances removed from the property?

16. Are all appropriate licenses and permits current and are you presently in compliance with all regulations for continued utilization of licenses/permits? Yes or No? If not, and subject to pending suspension or revocation action, please describe basis for and copies of suspension/revocation action.

17. Please attach copies of permits/licenses involving chemicals or substances used or removed on the premises, including those described in Paragraph 13?

18. Are there underground tanks, dumps, lines, or pipes on the premises which store or convey chemicals or substance including those described in Paragraph 13? Yes or No?

19. Please attach copies of any permits/licenses regarding tanks, dumps, lines or pipes used on the property?

20. Have those tanks/lines been tested for structural integrity? (include results of testing) Yes or No?

21. Are electrical transformers, switches, capacitors or other comparable devices on premises? Have they been inspected for the Presence of P.C.B.'s or other hazardous toxic substances? *If the inspection reports have been made, include copies.	<input type="checkbox"/> Yes or <input type="checkbox"/> No? <input type="checkbox"/> Yes or <input type="checkbox"/> No?
22. Have there been or is there physical evidence of any spills, leaks, or other releases of any toxic/hazardous chemicals/substances on the property or adjoining property?	<input type="checkbox"/> Yes or <input type="checkbox"/> No?
23. Has any governmental agency ever cited, investigated, or reported upon any release or spill of any substance or chemical on the property or adjoining property?	<input type="checkbox"/> Yes or <input type="checkbox"/> No?
24. Please attach copies of any citations, investigation, report, response action, or notice concerning this property issued by a governmental agency.	

Applicant certifies that the above information is true, entire, and accurate.

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Proposed Buyer/ Applicant's Signature

Current Property Owner Signature

Print Name of Buyer

Print Name of Current Property Owner

Insert Bank Officer Name - Title
 Bank Officer/Lending Official

*In addition to the credit evaluation checklist ABOVE, the following information will also be needed for the **Packaging and Closing process** of your loan request. Please note that this checklist is preliminary and is only being provided for your convenience.*

Packaging Requirements...**CORPORATE DOCUMENTS:**

- If the borrowing entity or corporate guarantor is a Corporation:**
 - 1. Certificate of Existence from Secretary of State
 - 2. Filed Articles of Corporation
 - 3. Bylaws
 - 4. Secretary's Certificate (to be provided by your closer)
 - 5. Copy of SS-4 Application for Employer Identification Number (if newly formed corporation)
 - 6. Filed copy of Fictitious Name/DBA/Assumed Name/Trade Statement (if applicable)

- If the borrowing entity or corporate guarantor is a Limited Liability Company (LLC):**
 - 7. Certificate of Organization from Secretary of State
 - 8. Filed Articles of Organization
 - 9. Operating Agreement
 - 10. LLC Certificate of Members (to be provided by your closer)
 - 11. Copy of SS-4 Application for Employer Identification Number (if newly formed company)
 - 12. Filed copy of Fictitious Name/DBA/Assume Name/Trade Statement (if applicable)

- If the borrowing entity or corporate guarantor is a Partnership:**
 - 13. Certificate of Partnership from Secretary of State or County Recorder
 - 14. Partnership Agreement
 - 15. Certificate of Members (to be provided by your closer)
 - 16. Copy of SS-4 Application for Employer Identification Number (if newly formed partnership)
 - 17. Filed copy of Fictitious Name/DBA/Assume Name/Trade Statement (if applicable)

Closing Requirements...**Collateral Conditions:**

- 18. If life insurance is required, please provide a copy of the life policy in minimum amount required by lender and *recorded* collateral assignment of policy to lender.
- 19. If a lien position is being required on residential property, please provide a copy of the legal description of the property along with current mortgage statement(s) on the senior lien(s).
- 20. If business assets are being taken, please provide a detailed list of all machinery and equipment (*any item valued \$500 or more must include a serial number*)
- 21. If a lien position is being required on commercial property (other than the subject property), please provide a copy of the legal description of the property along with a current mortgage statement(s) on the senior lien(s).

Other:

- 22. Copy of all required licenses and/or permits necessary to lawfully operate the subject business
- 23. Name and telephone number for the agent that will be insuring all collateral as well as business liability coverage, and workers compensation coverage.
- 24. Copy of bank statement(s) evidencing cash injection, if applicable. If cash has already been injected into the deal, please provide copies of canceled checks (front and back) with corresponding invoices. (***This request is very time consuming and if not submitted accurately, can delay closing.***)
- 25. Please list any previous government guaranteed applications or loans for the borrower, guarantors, or affiliates.

Please note that while all attempts have been made to make this list comprehensive, further processing may require additional items not listed within this checklist. Once your loan is approved, a final detailed closing checklist will be provided. Thank You.