

Thank you for considering your Credit Union for your business borrowing needs. Your Credit Union will be utilizing the services of Cooperative Business Services, LLC ("CBS") to process, underwrite, and service your member business loan. For your Credit Union to provide a timely response to your business loan request, please complete the attached forms and return them directly to CBS or your Credit Union. In addition to the attached application forms, please provide the following information:

#### Checklist for All Loan Requests:

 Most recent interim financial statements

 Completed Business Loan Application

 Completed Resume-attached

 Completed Personal Financial Statement(s)-attached

 Previous three (3) years of Personal Tax Returns

 Organizational Documents:

 Articles of Incorporation/Organization

 By-laws/Operating Agreement

 Trust Documents

#### Checklist for Existing Businesses (In addition to the above, "All Loan Request" items)

Previous three (3) years Business Tax Returns (Includes the borrowing entity, and any affiliated businesses which you/your partner owns 20% or more.)

Current Interim Financial Statement (Balance Sheet & Income Statement) within 60 days of application)

Prior year Interim Financial Statement (Balance Sheet & Income Statement) for the same period as listed above

Accounts Payable and Accounts Receivable Listing

Debt Schedule listing all outstanding business debt- attached

Bids/Estimates/Invoices to support loan proceeds

Purchase agreements

#### Checklist for New/Start-up Businesses (In addition to the above, "All Loan Request" items)

Business Plan		
Projections		
Year 1 – Month-to-Month	Year 2 – Annualized	Year 3 - Annualized

**Opening Day Balance Sheet** 

Bids/Estimates/Invoices to support loan proceeds Purchase agreements

#### Checklist for Real Estate/Construction/Equipment Transactions (In addition to the above, "All Loan Request" items)

Copy of Real Estate purchase contract Estimates for construction/renovations/remodeling Plans, specifications, and details of any proposed construction List of machinery, equipment, furniture, and fixtures, now owned by the applicant business

Rent Rolls and signed leases

Checklist for **Business Acquisitions** (In addition to the above, "All Loan Request" items)

Copy of Purchase Contract (Asset Purchase/Stock Purchase)

Three (3) years of Seller's Business Tax Returns

Three (3) years of Seller's Financial Statements (Balance Sheet & Income Statement)

Current Business Financial Statement (Balance Sheet & Income Statement) for Seller within 60 days of application

### COMPANY INFORMATION

Business Name	Key Contact
Borrowing Entity*	Email Address
Address	Mobile Phone
City/State/Zip	Business Telephone
County	Business Fax
Business Industry	Date Established
Tax ID Number	Website
Number of Employees at Present Time	After this Loan

\*Please **Type** or **Print** the borrowing entity's legal name as it should appear on all documents.

### USE OF PROCEEDS -

Real Estate Acquisition	
Real Estate Improvements	
Real Estate Refinance	
Business Acquisition	
Working Capital/Cash Out	
Debt Refinance (other than Real Estate)	
Total Financing Required	
Less Borrower's Down Payment	
Less Seller Carry Back	
Total Loan Request	
If a refinance, is there a prepayment penalty?	Yes No

### COLLATERAL -

#### Collateral Detail: (Please provide address if real estate)

Collateral Being Pledged for This Loan \_\_\_\_\_

\*Cooperative Business Services requires that we have the 1st Lien Position on Collateral Pledge. I certify to the best of my knowledge that the information contained herein is true and correct.

Signature	Date
Print Name	



### **OWNERSHIP & MANAGEMENT**

Please provide a listing of Owners, Officer Titles, and Ownership Percentages at time of loan closing. You will be executing legal documents for your loan request. Please **Type** or **Print** your Legal Name as it should appear on all documents.

Officer Title	Principal	Ownership
1		%
2		%
3		%
4		%
5		%
6		%

#### **AFFILIATE BUSINESS**

List below all business concerns in which the applicant or any of the individuals listed in the ownership section above have any ownership.

Check if all Affiliate info is attached

Company Name Owner		% of Ownership
		%
		%
		/o
BUSINESS REFERENCES		
Name of Your Insurance Company and Key Contact		Phone
Name of Firm		Email
Is the business or any principal liable as guarantor or endorser?	Yes No	Details
Are any real estate taxes currently past due by the business?		
Are any real estate taxes currently past due by any principal?		
Has the business ever declared bankruptcy?		
Has any principal ever declared personal bankruptcy?		
Has any affiliate company ever declared bankruptcy?		
Has any principal or guarantor ever been convicted of a felony?		

Other Business Accounts (Name of Financial Institution or Third-Party Account) If multiple accounts or lenders, please use separate sheet .

Credit Cards Cash Management



### MANAGEMENT/OWNER

To be completed in full by each officer, director, key employee, or owner of 20% or more of the company; if an item is not applicable, please indicate so.

**PERSONAL INFORMATION** (The spouse is asked to complete separately if owner of 20% or more of borrowing entity)

Name					
First	Middle		Maiden	Last	
S#	Place of Birth			_ Date of Birth	
Marital Status	Spouse's	Name First		Middle	Last
				Middle	Last
	If no, give Alien Registration N	Number			
SS #					
JS Citizen					
Current Home Address			<b>2</b>		
	Street	City	State	Zip	
<b>EMPLOYMENT HISTO</b>	<b>RY</b> (List chronologically, beginn	ing with current	t employment. Or	attach current resume)	
			- (		
Company Name			Type of Business	;	
Address	et City		State	7:-	
			State	Zip	
-ositions/Duties					
Dates There From			Until Month	Year	
Wor			Wonth	ieai	
Company Name			Type of Business	i	
Address					
Stree	et City		State	Zip	
Positions/Duties					
Dates There From			Until		
Mor	nth Year		Month	Year	
EDUCATION HISTORY					
Name of Institution		City/State		Degree/Certificate	Year
High School					
College/University					
echnical School					
Graduate School					
MILITARY SERVICE					
Branch		Y	/ears Served		
				wards	



### MANAGEMENT/OWNER (CONT.)

Please provide the following information:

Yes	Are you or any business where you have ownership or contingent liability, involved in any pending lawsuits? If so, please provide details.
No	
Yes	Are you or your business presently under indictment, or on parole or probation? If so, please provide details.
No	
Yes	Have you ever been charged with or arrested for any criminal offense other than a minor vehicle violation? If so,
No	please provide details.
Yes No	Have you ever been convicted of any criminal offense other than a minor vehicle violation? If so, please provide details.
Yes No	Are you current on all federal, state, and county taxes, including but not limited to payroll, sales tax, workman's compensation, etc.? If not, please provide details.
Yes No	Are you current on all personal and intangible property taxes? If not, please provide details.
lf you are a	applying for an SBA loan, please answer the following questions:
Yes	Do you presently have an SBA loan? If so, who is the lender? Are your payments current?
No	
Yes	Are you more than 60 days delinquent under the terms of (a) administrative order, (b) court order, or (c) repayment
No	agreement that requires payment of child support? If so, please provide details.
Note: Any	person holding 20% or more ownership is required to complete a separate background form.
I declare u	nder penalty of perjury that these statements are true and correct.
Signature	Date
Print Name	ē

## **BUSINESS DESCRIPTION -**

Briefly describe your business:



### **BUSINESS DESCRIPTION (CONT.)** –

Who are the top three customers of your business?

Do any of these customers make up more than 25% of your sales? If yes, who? How long has your business had a relationship with the customer(s)?

Who are your major competitors?

Who are your key employees (name and position) and how long have they worked for your business?

If applicable, detail the reason for any of the negative trends in your company's financial performance over the last three years. Sales:

Costs of Goods Sold:

General & Administrative Expenses:

If you become incapacitated, does your company have a succession plan? If so, please describe below:



### PERSONAL FINANCIAL STATEMENT

Complete this form for (1) each proprietor, or (2) each limited partner and each general partner, or (3) each stockholder and each corporate officer and director, or (4) any other person or entity providing a guaranty on loan.

Name Residence:	As of: (Month/Year)
Address:	Personal Phone:
City, State, Zip:	Email Address:
Business Name of Applicant/Borrower:	Business Phone:

\*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

ASSETS	(Omit cents)	LIABILITIES	(Omit cents)
Cash on Hand & in Banks		Accounts Payable	
Savings Accounts		Notes Payable to Banks & Others	
IRA or Other Retirement Accounts		(Describe in Section 2)	
Accounts & Notes Receivable		Installment Account (Auto)	
Life Insurance Cash Surrender Value Only		Monthly Payments	
(Complete Section 8)		Installment Account (Other)	
Stocks and Bonds		Monthly Payments	
(Describe in Section 3)		Loan on Life Insurance	
Real Estate		Mortgages on Real Estate	
(Describe in Section 4)		(Describe in Section 4)	
Automobile-Present Value		Unpaid Taxes	
Other Personal Property		(Describe in Section 6)	
(Describe in Section 5)		Other Liabilities	
Other Assets		(Describe in Section 7)	
(Describe in Section 5)		Total Liabilities	
		Net Worth	
TOTAL		TOTAL	
Section 1. Sources of Income		Contingent Liabilities	
Salary		As Endorser or Co-Maker	
Net Investment Income		Provision for Federal Income	
Real Estate Income		Legal Claims & Judgements	
Other Income		Tax Other Special Debt	
(Describe Below)*			



Section 2. Notes Pay	able to Bank	and Others	s (Use attachi	ments if necessary	. Each attachme	ent must be identif	ied as a part of this sta	tement and signed)
Name and Address of Note Holder(s)		(s) Origin	al Balance	Current Balance	Frequency	/ (monthly, etc.)	Type of Collateral /How Secured or Endorsed	
Section 3. Stocks and E	Bonds. (Use att	tachments if	necessary. E	ach attachment r	nust be identifi	ied as a part of this	s statement and signe	d.)
Number of Shares	Name of Se	curities	Cost	0	arket Value uotation/ cchange	Date of Quota	tion/Exchange	Total Value
Section 4. Real Estate	e Owned. (Lis	t each parc	el separate	ly. Use attachme	ents if necessa	ary. Each attachm	nent must be identifi	ed as a part of
		PROPERT	ΎΑ	P	ROPERTY B		PROPERTY C	
Type of Property								
Address of Property								
Name of Property Ov	vner							
Date Purchased								
Original Cost								
Present Market Value								
Name of Lender								
Loan Number								
Loan Balance								
Amount of Payment p	per Month							
<b>Section 5</b> . Other Pers amount of lien, terms						as security, state	e name and address	of lien holder,
Section 6. Unpaid Taxe	es. (Describe a	as to type, to	whom pay	able, when due,	amount, and to	o what property, i	f any, a tax lien attach	es.)
Section 7. Other Liab	oilities. (Descri	ibe in detai	l.)					
Section 8. Insurance	Held. (Give fa	ace amount	and cash s	urrender value o	of policies nan	ne of insurance a	nd beneficiaries.)	
I authorize the lender to the lender to pull a per stated date(s). These st application may result i statements on a conven	rsonal credit b atements are r n forfeiture of	ureau repor made for the benefits, a f	t. I certify the e purpose of ine up to \$1	e above and the f either obtaining 0,000, or imprise	statements co a loan or guar nment for not	ntained in the atta ranteeing a loan. I more than five yea	achments are true and understand FALSE st ars, or both, under 18	d accurate as of the atements on a loan
Signature			_ Print Nan	ne		Date _	SS #	
Signature								



### SCHEDULE OF BUSINESS DEBT

List Below All Business Fixed Debt, Lines of Credit, Shareholder's Notes and Capital Leases. Check Here if Schedule of Business Debt is Attached

Application Name \_\_\_\_\_\_ As of Month Ending \_\_\_\_\_

Creditor	Original Date	Original Balance	Present Balance	Interest Rate	Maturity Date	Monthly Payment	Collateral	Current or Delinquent
				%				
				%				
				%				
				%				
				%				
				%				
				%				
				%				
				%				
				%				
TOTAL								

I declare under penalty of perjury that these statements are true and correct.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_



#### BUSINESS LOAN APPLICATION AND ACKNOWLEDGMENT AND AGREEMENT

By signing below, the loan applicant and each of the undersigned ("Loan Applicants"), specifically represent the Credit Union ("Lender") and the Lender's actual and potential agents, brokers, processors and underwriters, attorneys, insurers, servicers, successors and assigns (collectively "Lender and Lender's Agents") and agree and acknowledge that: (1) the information provided on all accompanying forms, financial statements, and schedules ("Loan Application") for obtaining credit is true, accurate, and complete as of the date set forth opposite the Loan Applicants' signatures; (2) the representations made in the Loan Application will be continuously relied upon by the Lender and the Lender's Agents in evaluating the Loan Application and, if approved, in extending credit and that the Loan Applicants acknowledge that they have an obligation to amend and supplement the information provided in the Loan Application if any material facts should change prior to closing any loan; (3) Lender and Lender's Agents have not made any commitment to approve the Loan Application and extend credit, unless otherwise agreed to in writing; (4) Lender and Lender's Agents are authorized to conduct any inquiries they decide are necessary to verify the accuracy of the information contained in the Loan Application, and that Lender and/or Lender's processors and underwriters and servicers, successors and assigns are authorized to obtain credit reports from credit reporting agencies on the Loan Applicants; (5) Lender and/or Lender's servicers, successors and assigns are authorized to answer any questions from others about Lender's credit experience with the Loan Applicants; (6) Lender and/or Lender's servicers, successors and assigns are authorized to retain the Loan Application, whether or not Lender approves any extension of credit; (7) if credit is extended, Lender and/or Lender's servicers, successors and assigns are authorized to obtain credit information regarding the Loan Applicants from time to time during any time that the loan has an outstanding balance; (8) Lender and Lender's Agents shall not be liable for any claim arising from the use of information provided to the Loan Applicants or for providing such information to others; (9) intentional or negligent misrepresentation of the information contained in the Loan Application may result in civil liability, including monetary damages, to any person who may suffer a loss due to reliance upon any misrepresentation and criminal penalties including, but not limited to, fine or imprisonment or both under provisions of Title 18, United States Code, Section 1001, et seq.

#### NOTICE OF RIGHT TO RECEIVE APPRAISAL REPORT

The lender may individually, or by and through Cooperative Business Services, LLC ("CBS") order an evaluation or appraisal to determine the value of any property that may be utilized as collateral for any proposed loan from the Lender to Loan Applicants. Lender or CBS may charge the Loan Applicants for the cost(s) associated with an appraisal. Lender and CBS will promptly provide the Loan Applicants a copy of any evaluation or appraisal report, even if the proposed loan is denied or is not consummated, for any reason. Loan Applicants can order and pay for a separate appraisal on any property to be utilized as collateral, for Loan Applicant's use, and solely at Loan Applicant's cost. If the application for credit is secured by a first lien on a dwelling, (as defined in § 1002.14(b)(2), Loan Applicant is hereby notified: Lender may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly give you a copy of any appraisal, even if your loan does not close. You can pay for an additional appraisal for your use at your own cost.

#### HOME MORTGAGE DISCLOSURE ACT NOTICE

For those Loan Applicants submitting a Loan Application that includes collateral consisting of real property that is considered one (1) to four (4) family residences/dwellings, Lender will collect information in accordance with the Home Mortgage Disclosure Act ("HMDA") § 1003.5(b)(2) and (c). The HMDA data about Lender's residential mortgage lending are available online for review. The collected data shows geographic distribution of loans and Loan Application(s), ethnicity, race, sex, age and income of Loan Applicants, and information about loan approvals and denials. HMDA data for many other financial institutions are also available online at the Consumer Financial Protection Bureau's website (www.consumerfinance.gov/hmda).



#### NOTICE CONCERNING COLLECTION OF EARLY EXIT FEE

In the event that Lender provides any loan to Loan Applicant pursuant to the Loan Application that permits for or requires collection and recovery of a prepayment penalty and/or early exit fee ("Early Exit Fee") Loan Applicant is hereby notified and acknowledges that CBS will receive and retain said Early Exit Fee, and that neither Lender or any other credit union that may be participating in the loan will receive any portion of said Early Exit Fee.

#### ADDITIONAL NOTICE

CBS complies with Section 326 of the Patriot Act, which requires CBS to obtain, verify, and record information that identifies each applicant for financing. CBS complies with the FACT Act, and other similar laws, which allow each applicant to opt out of information sharing for marketing purposes. CBS also complies with the Equal Credit Opportunity Act ("ECOA"), which prohibits creditors from discriminating against credit applicants on basis of race, color, religion, national origin, sex, marital status, age, receipt of public assistance, or exercise of legal rights, including the good faith exercise of any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is:

#### **Region II, National Credit Union Administration**

Region 2-Capital 1900 Duke Street, Suite 300 Alexandria, VA 22314

(Signature Page Follows)



#### **REGULATION B NOTICE OF INTENT TO APPLY FOR JOINT CREDIT**

Regulation B and the Equal Credit Opportunity Act requires that a lender obtain evidence of each loan applicants intent to apply for joint credit before a credit decision can be made. Failure to complete when required will render the application/request for credit incomplete.

Please mark one of the following choices:

- I (we) intend to apply for joint credit
- I (we) do not intend to apply for joint credit

#### DISCLOSURE AND CONSENT TO RECEIVE DOCUMENTS IN ELECTRONIC FORM

The disclosures document your consent to conduct transactions electronically and to electronically receive disclosures and notices of your accounts you are applying to open. The disclosure also describes your rights to conducting transactions electronically, including receiving disclosures and notices as well as consequences of withdrawing your consent. For your reference, we recommend you print and retain a copy of the disclosure and agreements related to the transaction. Unless you consent to receive electronic notices, you will have the right to receive all required disclosures in paper form (i.e., non-electronic). You may withdraw your consent at any time by contacting us at the address or phone number listed below. Your consent to conduct transactions and receive disclosures and notices electronically means that you agree to provide to us the information (including your current email address) needed to communicate with you electronically and to provide updates if the information changes immediately. We also reserve the right to provide any disclosures or notices in writing, rather than electronically. Except as otherwise provided by law or in other agreements, you cannot give us notices electronically, and all notices from you must be in writing. These disclosures and consents are meant as provisions of the Electronic Signatures in Global and National Commerce Act (E Sign Act) (15 U.S.C. 7001 et seq.). Where the disclosures under 1002.5(b)(1), 1002.5(b)(2), 1002.5(d)(1), 1002.5(d)(2), 1002.5(d)(2),

#### ACKNOWLEDGMENT

(You acknowledge receipt of a copy of this notice on today's date)

Print or Type Applicant Name	Applicant Signature	Date
Print or Type Applicant Name	Applicant Signature	Date

#### BORROWER

Primary Applicant/ Borrowing Entity Name
Applicant Address

Contact Information for CBS: 888.697.9555 www.cbscuso.com

These Notices are intended for use in connection with applications for business credit under 1002.9(a)(3)



### APPENDIX A TO § 1010.230

#### CERTIFICATION REGARDING BENEFICIAL OWNERS OF LEGAL ENTITY CUSTOMERS

#### I. GENERAL INSTRUCTIONS

#### WHAT IS THIS FORM?

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

#### WHO HAS TO COMPLETE THIS FORM?

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

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

#### WHAT INFORMATION DO I HAVE TO PROVIDE?

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

(i) Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation); **and** 

(ii) An individual with significant responsibility for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer).

The number of individuals that satisfy this definition of "beneficial owner" may vary. Under section (i), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (i), you must provide the identifying information of one individual under section (ii). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30 percent equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii)) and four 25 percent equity holders under section (i)). The financial institution may also ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this form.



#### II. CERTIFICATION OF BENEFICIAL OWNER(S)

Cooperative

Business Services

#### PERSONS OPENING AN ACCOUNT ON BEHALF OF A LEGAL ENTITY MUST PROVIDE THE FOLLOWING INFORMATION:

CBS Loan #				
Legal Entity Info	ormation			
Name			_ TIN/EIN	
Address				
	Street			
	City	State	Zip	

Each individual listed, if any, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, represents 25% or more ownership of the equity interest of the legal entity listed above.

In addition, at least one individual listed has significant responsibility for managing the legal entity listed above, such as an executive officer or senior manager (i.e., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer, or any other individual who regularly performs similar functions, or legally bind the company.

If appropriate, an individual listed may be shown as a Beneficial Owner and as an executive officer/senior manager (Control).

Check if Beneficial Owner is not applicable (no individual meets this definition). There must be at least one name listed with executive officer/senior manager responsibility (control).

Beneficial Owner Control			
Name			
Address			
Street			
City	State	Zip	
SSN/Foreign Passport Number	Count	try of Issuance (if applicable)	
Date of Birth	Percentage of Ownersh	ip Title	
Beneficial Owner Control			
Name			
Address			
Street			
City	State	Zip	
SSN/Foreign Passport Number	Count	try of Issuance (if applicable)	
Date of Birth	Percentage of Ownersh	ip Title	



Beneficial Owner Control			
Name			
Street			
City	State	Zip	)
SSN/Foreign Passport Number		Country of Issuance (if a	applicable)
	Demonstration of Ou	un e un la lue	<b>-</b>
Date of Birth			litle
Beneficial Owner Control			
Name			
Address			
Street			
City	State	Zip	0
SSN/Foreign Passport Number		Country of Issuance (if a	applicable)
Date of Birth	Percentage of Ou	norship	<b>T</b> 1
			litie
Beneficial Owner Control			
Name			
Address			
Street			
City	State	Zip	0
SSN/Foreign Passport Number		Country of Issuance (if a	applicable)
Date of Birth	Percentage of Ow	nershin	Title
		mersnip	Inte
l,	(name of	natural person openin	a accont), hereby certify, to the best
, my knowledge, that the information provi			,,,,,,
Signature		Date	
Legal Entity Identifier		(Optional)	