

SBA LOAN/LINE APPLICATION

BUSINESS APPLICANT INFORMATION SECTION

BUSINESS INFORMATION				
Legal Name of Business Applicant (For sole proprietor, owner(s) name)		Trade Name (Doing business as)		Tax ID Number (For sole proprietor, owner(s) SSN)
Primary Contact Name		Primary Contact Phone Number (if different from Business)		
Street Address		City	County	State Zip
Mailing Address (if different from above)		City	County	State Zip
Business Telephone	Business Fax	Date Business Established		Under Current Management Since
LEGAL STATUS: <input type="checkbox"/> Corporation <input type="checkbox"/> Sub-S Corporation <input type="checkbox"/> Sole Proprietorship/Individual <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Other (Please explain)				
COMPANY OWNERSHIP (List below all officers, principals and owners of 20% or more of business)				
Officer Name(s)	SSN	Home Street Address	Title	% Owned
AFFILIATES (List below all business concerns in which the applicant company or any of the individuals listed in the ownership section above have ownership in excess of 20%.)				
Company Name	Owner (Applicant Company or Individuals)		% of Ownership	
Please answer the following questions				
Is the business applicant or any guarantor or co-applicant currently involved in any litigation or other legal claims?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are any business assets held in trust? (If yes, please include a copy of the Trust Agreement, or a certification as to terms.)			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is any loan applicant, or any director, executive officer or principal shareholder of loan applicant, an executive officer, director or principal shareholder of any financial institution?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the business an endorser, guarantor, or co-maker for obligations not listed in its financial statements? (If yes, provide details.)			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does your business use or store any hazardous/toxic materials, or produce hazardous/toxic waste?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the business owe any taxes for years prior to the current year?			<input type="checkbox"/> Yes	<input type="checkbox"/> No

SBA LOAN/LINE APPLICATION

BUSINESS APPLICANT INFORMATION SECTION

BUSINESS DEBT SCHEDULE

Provide information for all business installment debts, contracts, notes, and mortgages payable. Also indicate if the debt is to be refinanced with SBA loan proceeds. (Business Acquisitions and Start-Ups, please provide opening day information.)

Creditor Name/Address	Original Amount	Original Loan Date	Present Balance	Interest Rate	Maturity Date	Monthly Payment	Current/Delinquent	Collateral	Payoff with Proceeds?

List all previous government loans applied for or received, even if fully repaid, in this section.

Name of Agency	Original Amount of Loan	Date of Request	Approved or Declined	Balance	Current or Past Due

Total Present Loan Balance: \$ _____ Total Monthly Payments: \$ _____

BUSINESS DEPOSIT ACCOUNTS

Please list all Vectra Bank deposit accounts. In order to simplify the payment process, we recommend that you utilize a Vectra Bank Business Checking account for automatic debit payments. Current Vectra Bank customers, please select the ONE account you would like to use to initiate automatic payments from, and initial to provide authorization. New customers, please work with your banker to open a Business Checking account and initiate the auto-debit payment to your loan.

Vectra Bank Checking Account Number(s)	Name on Account	Automatic Deduction Authorization (initial)

Please list other business deposit accounts and indicate whether you will be transferring them to Vectra Bank. Creditor Name/Address

Financial Institution	Account Type (checking, savings, etc.)	Current Balance	Average Balance	Move to Vectra?
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

SBA LOAN/LINE APPLICATION

PROJECT COST WORKSHEET

PROJECT COST WORKSHEET	
Uses of Funds	Amount (Round to the nearest dollar.)
Land/Building Purchase	\$
Building Renovation/New Construction	\$
Equipment Purchase	\$
Leaseholds	\$
Working Capital	\$
Inventory	\$
Acquisition of Existing Business	\$
PayOff/Refinance Existing Business Debit	\$
PayOff/Refinance Existing SBA Loan	\$
Soft Costs (SBA Guaranty & Closing Fees)	\$
Other:	\$
Total Project Cost:	\$
SOURCES OF FUNDS	
Source	Amount (Round to the nearest dollar.)
Borrower's Equity Contribution (List Source of Equity)	\$
Vectra Bank SBA Loan Requested	\$
Other Governmental Loan Assistance	\$
Other:	\$
Total Project Funding:	\$
COLLATERAL OFFERED	
Collateral	Present Market Value (Round to the nearest dollar.)
Land	\$
Building	\$
Machinery & Equipment	\$
Furniture	\$
Fixtures	\$
Accounts Receivable	\$
Inventory	\$
Residential Real Estate	\$
Stocks/Bonds (attach most recent statements)	\$
Business Vehicles	\$
Other:	\$
Total Value:	\$

A VECTRA BANK
BUSINESS BANKER CAN
ASSIST YOU IN COMPLETING THE
CREDIT REQUEST INFORMATION
SECTION. PLEASE CONTACT
YOUR BANKER OR CALL
1-866-4VECTRA
TO FIND A
BUSINESS BANKER
NEAR YOU.

SBA LOAN/LINE APPLICATION

APPLICANT'S AGREEMENT & CERTIFICATION

By signing below, you certify that all the information you've given with this application is true and complete. You authorize us to verify all your statements with any source, obtain credit and employment history, (including you spouse's, if you live in a community property state) and exchange information with others about your credit and account experience with us. You agree to provide additional information that we may require to process this application, including but not limited to true and complete federal income tax returns, employment verification and income verification.

You also agree to reimburse the Bank for its expenses incurred in connection with any credit commitment. These expenses include without limitation the Bank's appraisal, environmental services and legal costs and are payable even though the extension of credit may not be consummated.

In the event you have applied for a loan that might or will be secured by residential real property, you have the right to a copy of the appraisal report used in connection with your application for credit. If you would like a copy, please write to us at the office from which you obtained this request. In order to comply with your request, please provide us with the following information: Name used on your application for credit, your complete address, your phone number and your application or loan number if known. If you wish a copy, you must notify us no later than 90 days after we notify you about the action taken on your credit application or 90 days from the date you withdrew your request.

This is to advise you that the sole purpose of the appraisal is to establish the adequacy of the property as security for the loan. Vectra Bank, the appraiser, any inspector retained by Vectra Bank and any agency insuring the loan make no representations or warranties of any kind or nature as to the market value of the property or its improvements.

Everything you have stated in this application is correct to the best of your knowledge. You understand that Vectra Bank will retain this application whether or not it is approved. Vectra Bank is authorized to check your credit and employment history and to answer questions about Vectra's credit experience with you. You have read and understood the application form and agree to provide any additional information that may be legally required to determine credit worthiness. (NOTE: Falsification of credit information to a national bank may be a federal offense and may result in exemption from discharge in the event a petition for bankruptcy is filed).

Authorized Signature: _____ Authorized Signature: _____

Print Name & Title: _____ Print Name & Title: _____

Street Address: _____ Street Address: _____

City, ST, Zip: _____ City, ST, Zip: _____

Soc. Sec. or Tax ID No.: _____ Soc. Sec. or Tax ID No.: _____

Date: _____ Date: _____

APPLICANT'S AGREEMENT & CERTIFICATION SECTION