



BUSINESS LOAN APPLICATION

Business items required

Financial information:

- Business Federal Tax Returns for last 3 years
- Interim business financial statements within last 60 days (balance sheet and income statement)
- Business debt schedule (form included in application)
- Accounts receivable and accounts payable agings (should agree to interim balance sheet)

Entity documents (please provide those that are applicable):

- If Partnership: Partnership agreement
- If LLC: Operating agreement, articles of organization, list of members and ownership percentages
- If Corporation: Articles of incorporation and bylaws
- If Sole Proprietor: Please state on General Business Information section of application
- Copy of business license

Personal items required for all 20% or greater owners of the business

Financial information:

- Federal Income Tax Returns (last 3 years)
- Personal financial statement dated within the last 60 days (form included in application)
- K-1s for last 3 years (if applicable)

Other information:

- Resumes of all borrowers, guarantors, key management personnel (form included in application)

Other "deal specific" information required as listed below

If start-up business:

- Business plan
- Two years of projections with assumptions. First year of projections must be on a month-by-month basis

If real estate purchase or construction:

- Real estate purchase contract
- Construction contract or cost estimates

If non-U.S. citizen:

- INS Form G845 and copy of front and back of Alien Registration Card

If franchise:

- Franchise agreement and FTC disclosure statement

Notes:

We recognize that some of these items may not be available for our first meeting. All financial statements must be signed and dated, and the most recent statement must be within 90 days. Appraisal and environmental report (if required) must be ordered by the bank.

Loan Request Summary Total Project Costs

Loan type: SBA 7a SBA 504 Conventional Construction/Permanent Loan

Business Premises

Acquire Vacant Land _____
Construct Building _____
Purchase Land and Existing Building _____
Renovation of Owner Occupied Building _____
Leasehold Improvements _____

SUBTOTAL: _____

Other Fixed Assets

Purchase Furnishing or Fixtures _____
Purchase Machinery or Equipment _____

SUBTOTAL: _____

Liquid Assets

Inventory Purchase _____
Working Capital _____
(Include Accounts Payable Reduction)

SUBTOTAL: _____

Other

Acquisition of Existing Business _____
Franchise Purchase _____
Refinancing Bank Debt _____
Refinancing Other Debt _____
Estimated Closing Costs _____

(Appraisal, Title Insurance, Environmental Report, etc.)

Other _____

SUBTOTAL: _____

Total Estimated Project Amount:

Less Owner's Cash/Equity to be Injected _____
Less Seller Carry Back (if applicable) _____
Total Loan Request for Project _____

Source of Equity Injection: _____

General Business Information

Name of Business: _____

Contact Name: _____

Business address: _____

Business Phone: _____ Cell Phone: _____ Business Fax: _____

E-mail address: _____ Date of startup or acquisition of the business: _____

Current number of employees: Full Time _____ Part Time _____

Number of employees if loan approved: Full Time _____ Part Time _____

Bank where business accounts are located: _____ Address of bank: _____

Federal Tax ID # _____

Entity Type: Sole Proprietorship Limited Partnership Corporation
 Limited Liability Company General Partnership

Lease Information: Do you have a lease for the property your business currently occupies? Yes No
_____ Monthly Rent _____ Years remaining on lease _____ Renewal option Yes No

If this is a real estate transaction, what entity will own the real estate? _____

What is the ownership of this entity? _____

Ownership of Applicant Company

List all owners, partners, LLC Members and Stockholders totaling 100% of ownership.

Name _____ Title _____

E-mail address _____ % of ownership _____ %

Cell phone _____ Business phone _____ Home phone _____

Name _____ Title _____

E-mail address _____ % of ownership _____ %

Cell phone _____ Business phone _____ Home phone _____

Name _____ Title _____

E-mail address _____ % of ownership _____ %

Cell phone _____ Business phone _____ Home phone _____

Name _____ Title _____

E-mail address _____ % of ownership _____ %

Cell phone _____ Business phone _____ Home phone _____

If the answer to the following questions is yes, provide detail on separate sheet.

- 1. Has your business ever filed bankruptcy or defaulted on any debts? Yes No
- 2. Is your business a party to any lawsuit or claim? Yes No
- 3. Does your business owe any taxes for years prior to the current year? Yes No

Details of Business

Please describe the nature of the business and primary products or services:

Management succession plan: _____

Competitive advantage: _____

Trade area served: _____

Type of customers: _____

Terms of sales: _____

Major suppliers and terms of purchase: _____

Major competitors: _____

History of Business

Please provide a narrative history of the business and include the benefits to be derived from obtaining the Loan:

Management Resume (To be completed by each individual with more than 20% ownership in the company)

Name of Applicant Company: _____

Your Name: _____

PERSONAL: Date of Birth: _____ Place of Birth: _____

Marital Status: Single Married Divorced Widowed Number of Children: _____

EDUCATION: Name & Location	Dates Attended		Major	Did you Graduate?	Type of Degree
	From	To			
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

MILITARY:
Branch: _____ Dates of Active Duty: _____ Reserve Duty: _____

Date of Discharge: _____ Rank of Discharge: _____ Honorable Discharge? _____

TECHNICAL TRAINING: _____

WORK EXPERIENCE:
Name of Company & Location _____
Dates of Employment: From _____ To _____ Title: _____
Duties: _____

Name of Company & Location _____
Dates of Employment: From _____ To _____ Title: _____
Duties: _____

Name of Company & Location _____
Dates of Employment: From _____ To _____ Title: _____
Duties: _____

Below Required for SBA Loan Only

The following information is required by the U.S. Small Business Administration for all SBA 7(a) business loan applications in order to reflect the participation of various groups in the 7(a) program. Each OWNER of the business MUST provide the following information. Do NOT complete this section for key managers who are not owners of the business.

_____ % ownership in the business Gender: Male Female

Veteran status: Non-veteran Vietnam era veteran Other veteran

With which race does the owner most closely identify? (Choose one only) African American
 Native American (other than Eskimo or Aleut) Eskimo or Aleut Asian, Pacific Islander White Other

Does the owner consider him/herself to be of Hispanic origin? (Choose one only)
 Not Spanish/Hispanic Puerto Rican Hispanic, other than Puerto Rican

Management Resume (To be completed by each individual with more than 20% ownership in the company)

Name of Applicant Company: _____

Your Name: _____

PERSONAL: Date of Birth: _____ Place of Birth: _____

Marital Status: Single Married Divorced Widowed Number of Children: _____

EDUCATION: Name & Location	Dates Attended		Major	Did you Graduate?	Type of Degree
	From	To			
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

MILITARY:
Branch: _____ Dates of Active Duty: _____ Reserve Duty: _____

Date of Discharge: _____ Rank of Discharge: _____ Honorable Discharge? _____

TECHNICAL TRAINING: _____

WORK EXPERIENCE:
Name of Company & Location _____
Dates of Employment: From _____ To _____ Title: _____
Duties: _____

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Dates of Employment: From _____ To _____ Title: _____
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_____ % ownership in the business Gender: Male Female

Veteran status: Non-veteran Vietnam era veteran Other veteran

With which race does the owner most closely identify? (Choose one only) African American
 Native American (other than Eskimo or Aleut) Eskimo or Aleut Asian, Pacific Islander White Other

Does the owner consider him/herself to be of Hispanic origin? (Choose one only)
 Not Spanish/Hispanic Puerto Rican Hispanic, other than Puerto Rican

Estimated Projection and Forecast of Two Year's Earnings

(For startups: projections must be on a month-by-month basis for first year, including totals for first full year, please.)

APPLICANT: _____

	First Year Projection		Second Year Projection	
Dollar Estimates		% of Gross		% of Gross
Gross Receipts	\$ _____	100	\$ _____	100
Merchandise Cost	\$ _____	_____	\$ _____	_____
Gross Profit	\$ _____	_____	\$ _____	_____
EXPENSES:				
Officer's Salaries (only if corp.)	\$ _____	_____	\$ _____	_____
Employee's Wages	\$ _____	_____	\$ _____	_____
Accounting/Legal Fees	\$ _____	_____	\$ _____	_____
Advertising	\$ _____	_____	\$ _____	_____
Rent	\$ _____	_____	\$ _____	_____
Depreciation	\$ _____	_____	\$ _____	_____
Supplies	\$ _____	_____	\$ _____	_____
Electricity	\$ _____	_____	\$ _____	_____
Telephone	\$ _____	_____	\$ _____	_____
Interest	\$ _____	_____	\$ _____	_____
Repairs	\$ _____	_____	\$ _____	_____
Taxes	\$ _____	_____	\$ _____	_____
Insurance	\$ _____	_____	\$ _____	_____
Bad Debts	\$ _____	_____	\$ _____	_____
Miscellaneous	\$ _____	_____	\$ _____	_____
(If miscellaneous. expenses is large, please itemize)				
Other _____	\$ _____	_____	\$ _____	_____
TOTAL EXPENSES:	\$ _____	_____	\$ _____	_____
NET PROFIT BEFORE TAXES	\$ _____	_____	\$ _____	_____
LESS INCOME TAXES:	\$ _____	_____	\$ _____	_____
NET PROFIT AFTER TAXES:	\$ _____	_____	\$ _____	_____
LESS- Withdrawals	\$ _____	_____	\$ _____	_____
(Only if Proprietorship or Partnership)				
NET PROFIT REMAINING FOR PAYMENTS ON LOAN:	\$ _____	_____	\$ _____	_____

NOTE: Please complete projection assumptions form on the opposite page.

I certify the foregoing data fairly represents the potential annual earnings to the best of my knowledge.

Name _____ Title _____ Date _____

Business Debt Schedule

Furnish the following information on all installment debts, contracts, notes, and mortgages payable. Indicate by asterisk () items to be paid by loan proceeds and reason for paying same (present balance should agree with latest balance sheet submitted). Do not include accounts payable or accrued liabilities.*

Creditor Name and Address	Original Date	Original Amount	Present Balance	Interest Rate	Monthly Payment	Maturity Date	Collateral/Security
				%			
				%			
				%			
				%			
				%			
				%			
				%			
				%			
				%			
				%			
				%			
				%			
				%			
				%			
Total Present Balance / Total Monthly Payment			\$0		\$0		

PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION

As of _____, _____

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:** 7(a) loans - to the lender processing the SBA application; 504 loans - to the Certified Development Company processing the SBA application; Disaster loans - to the Disaster Processing and Disbursement Center at 14925 Kingsport Road, Fort Worth, TX 76155-2243; and 8(a)/BD applicants who are *individuals claiming social and economic disadvantaged status and their spouses* - electronically at <http://www.sba.gov> or send hard copy with paper application to either of the two following offices:

8(a) BD only	Mail to the following address, if your firm is located in one of the states below:	Mail to the following address, if your firm is located in one of the states below:
	US Small Business Administration DPCE Central Office Duty Station Parkview Towers 1150 First Avenue 10th Floor, Suite 1001 King of Prussia, PA 19406	Small Business Administration Division of Program Certification and Eligibility 455 Market Street, 6th Floor San Francisco, CA 94105
	MA, ME, NH, CT, VT, RI, NY, PR (Puerto Rico), VI (US Virgin Islands), NJ, PA, MD, VA, WV, DC, DE, GA, AL, NC, SC, MS, FL, KY, TN	IL, OH, MI, IN, MN, WI, TX, NM, AR, LA, OK, MO, IA

Name	Business Phone
Residence Address	Residence Phone
City, State, & Zip Code	
Business Name of Applicant/Borrower	

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

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 need 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 a part of this statement and signed.)

Name and Address 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 a 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 SBA/Lender 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 will rely on this information when making decisions regarding an application for a loan from SBA or an SBA Participating Lender, or for participation in the SBA 8(a) Business Development (BD) program.

Signature _____

Date _____

Print Name _____

Social Security No. _____

Signature _____

Date _____

Print Name _____

Social Security No. _____

NOTICE TO LOAN 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. 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 30 years and/or a fine of not more than \$1,000,000.

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

Any person who misrepresents a business concern's status as an 8(a) Program participant or SDB concern, or makes any other false statement in order to influence the 8(a) certification or other review process in any way (e.g., annual review, eligibility review), shall be: (1) Subject to fines and imprisonment of up to 5 years, or both, as stated in Title 18 U.S.C. § 1001; (2) subject to fines of up to \$500,000 or imprisonment of up to 10 years, or both, as stated in Title 15 U.S.C. § 645; (3) Subject to civil and administrative remedies, including suspension and debarment; and (4) Ineligible for participation in programs conducted under the authority of the Small Business Act.

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 (13 C.F.R. 145)

1. The prospective lower tier participant certifies, by submission of this loan application, 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 loan 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) _____		

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: _____
--	---

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.**

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.

Request for Transcript of Tax Return

OMB No. 1545-1872

▶ Request may be rejected if the form is incomplete or illegible.

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 "Order a Transcript" 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.	

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 IRS 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 1120A, Form 1120H, Form 1120L, 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 30 calendar 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 30 calendar 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 2010, filed in 2011, will not be available from the IRS until 2012. 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 45 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. _____

Check this box if you have notified the IRS or the IRS has notified you that one of the years for which you are requesting a transcript involved **identity theft** on your federal tax return

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, **either** husband or wife must sign. If signed by a corporate officer, partner, 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.

		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.

What's New

The IRS has created a page on IRS.gov for information about Form 4506-T at www.irs.gov/form4506. 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.

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.

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 "Order a Transcript" or call 1-800-908-9946.

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 the "Internal Revenue Service" at:
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	RAIVS Team Stop 6716 AUSC Austin, TX 73301
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	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	RAIVS Team Stop 37106 Fresno, CA 93888
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	559-456-5876
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	RAIVS Team Stop 6705 P-6 Kansas City, MO 64108
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	816-292-6102

Chart for all other transcripts

If you lived in or your business was in:	Mail or fax to the "Internal Revenue Service" at:
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, or A.P.O. or F.P.O. address	RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409
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	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	RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250
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	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 address on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address.

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.

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.

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.

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.

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 Products Coordinating Committee
SE:W:CAR:MP:T:T:SP
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.

AUTHORIZATION TO RELEASE INFORMATION

I/We hereby authorize the release to State Bank of Countryside of any and all information they may require at any time for any purpose related to our credit transaction with them. I/We further authorize State Bank of Countryside to release such information to any entity they deem necessary for any purpose related to 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 State Bank of Countryside

1. Signature _____ Date _____

Print Name _____ Social Security number _____

Home address _____ Date of Birth _____

2. Signature _____ Date _____

Print Name _____ Social Security number _____

Home address _____ Date of Birth _____

3. Signature _____ Date _____

Print Name _____ Social Security number _____

Home address _____ Date of Birth _____

4. Signature _____ Date _____

Print Name _____ Social Security number _____

Home address _____ Date of Birth _____

Check As Applicable. Please Read Carefully.

► **Applicant, if married may apply for separate credit.**

Individually* Applying in own name and relying only on own income or assets and not the income or assets of another person as the basis for repayment of the credit requested. **Only applicant signs this form.**

Jointly – Applying jointly with spouse Please provide information for both applicants in Personal Financial Statement. **Both Applicants must sign this form.**

If you intend to apply for joint credit, please initial here: **Applicant** _____ **Co-Applicant** _____

Jointly – Applying jointly with someone other than spouse Each Co-applicant(s) must complete and sign separate Personal Financial Statement(s). Name of Co-Applicant(s):

USA PATRIOT ACT NOTICE

IMPORTANT INFORMATION ABOUT PROCEDURES:

In accordance with Section 326 of the USA Patriot Act, State Bank of Countryside is required to obtain a copy of documents in identifying our loan customers to help the government fight the funding of terrorism and money laundering activities. State Bank of Countryside is required to obtain, verify, and record information that identifies each customer.

What this means for you: When you open an account or apply for a loan, we will ask for the name, address, Tax Identification Number, and other information that will allow Unity Bank to identify the business. To verify this information, we may obtain reports from third parties, such as credit reporting agencies. We will also ask to see organization documents for your business.



**STATE BANK
OF COUNTRYSIDE**

Small Business Loan Marketing Consent and Photo Release Form

CONTACT INFORMATION

Name of Individual Release is For: _____

Name of Business Release is For: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

LOAN INFORMATION

SBA Loan Type: _____ SBA Loan Amount: _____

Specify Use of Small Business Loan: _____

Consent for Publication & Release of Information for Marketing and/or Advertising Purposes

I, _____ (print name) authorize State Bank of Countryside to the reproduction, use or release of information as specified below (consent to each should be by initial of the signatory, not by checkmarks):

_____ Publication of above text

_____ Video images

_____ Audio recordings

_____ Photographic images (negatives & proofs)

I understand that the purpose of the above release is for advertising and marketing including sharing information with the general public. I understand and agree that once information is released or published State Bank of Countryside will not be able to control nor limit the extent of its publication, exposure, republication, use or redistribution.

This consent permits information sharing via the following methods (consent to each should be by initial of the signatory, not by checkmarks):

_____ Company Websites

_____ Social Media/Networking (Facebook, LinkedIn, etc.)

_____ Video

_____ Printed materials (Brochures, Newsletters, Posters, etc.)

_____ Advertising (Newspaper, Radio, Direct Mail, etc.)

_____ Other

I may revoke this consent at anytime by delivery of said revocation in writing to State Bank of Countryside:
6734 Joliet Rd.
Countryside, IL 60525
ATTN: Marketing

I understand that if I revoke this consent, the revocation will not apply to marketing and advertising materials and information already disclosed to the public. I further understand that information prepared for use may be submitted or included in unencrypted email.

I understand and agree that there shall be no fee paid, nor expected for having consented to the above captioned use and further state I have consented freely and willingly with no promise of future service nor under threat of service removal for having consented to use and publication.

Signature of Individual

Date

Witness

Date

ENVIRONMENTAL QUESTIONNAIRE

Property Address: _____
City: _____ County: _____ State: _____ Zip: _____
Legal Description: _____

Property is Vacant Land Improved

Instructions: The following shall be used as a guide to determine if an environmental audit is needed. The questionnaire is to be completed during an onsite inspection by the lender with the assistance of the owner of the site and/or the prospective borrower.

1. Presently, is the property or any adjoining property used for any Industrial or Manufacturing purpose?
 YES NO UNKNOWN
If yes, please specify: _____

2. In the past, has the property or any adjoining property been used for any Industrial or Manufacturing purpose?
 YES NO UNKNOWN
If yes, please specify: _____

3. Presently, is the property or any adjoining property used as a gasoline station, motor repair facility, commercial printing facility, dry cleaning, photo developing laboratory, junkyard or landfill, or as a waste treatment, storage, disposal, processing, or recycling facility?
 YES NO UNKNOWN
If yes, please specify: _____

4. In the past, to the best of your knowledge, as the property or any adjoining property been used as a gasoline station, motor repair facility, commercial printing facility, dry cleaning, photo developing laboratory, junkyard or landfill, or as a waste treatment, storage, disposal, processing, or recycling facility?
 YES NO UNKNOWN
If yes, please specify: _____

5. To the best of you knowledge are there currently or have there been previously any damaged or discarded automotive or industrial batteries, pesticides, paints or other chemicals stored on or used at the property or facility?
 YES NO UNKNOWN
If yes, please specify: _____

6. To the best of your knowledge are there currently or have there been previously any industrial drums or sacks of chemicals located on the property or at the facility?
 YES NO UNKNOWN
If yes, please specify: _____

7. Has fill dirt been brought onto the property from any other site?
 YES NO UNKNOWN
If yes, please specify: _____

8. To the best of your knowledge are there currently or have there been previously any pits, ponds, or lagoons located on the property?
 YES NO UNKNOWN
If yes, please specify: _____

9. To the best of your knowledge is there currently or has there been previously any stained or discolored soil, oily film on standing water, distressed vegetation or unusual odors on the property?
 YES NO UNKNOWN
 If yes, please specify: _____

10. To the best of your knowledge are there currently or have there been previously any registered or unregistered storage tanks (above or below ground level) located on the property?
 YES NO UNKNOWN
 If yes, please specify: _____

11. To the best of your knowledge are there currently or have there been previously any vents, fill pipes, or access ways indicating a fill pipe protruding from the ground on the property or adjacent to any structure located on the property?
 YES NO UNKNOWN
 If yes, please specify: _____

12. To the best of your knowledge are there currently or have there been previously any drains, flooring or walls located within the facility that are stained by substances other than water or are emitting foul odors?
 YES NO UNKNOWN
 If yes, please specify: _____

13. Is there now or have there been in the past any type of well or non-public watering system located on the property? If so, have any contaminants been identified in the well or system that exceed guidelines applicable to the water system? Furthermore, has the well been designated as contaminated by any government environmental/health agency?
 YES NO UNKNOWN
 If yes, please specify: _____

14. Do you or any occupant have any knowledge of environmental liens or governmental notification relating to past or recurrent violations of environmental laws with respect to the property or any facility located on the property? Also, if you are not the current occupant of the property have you made inquiry to the current occupant concerning this question?
 YES NO UNKNOWN
 If yes, please specify: _____

15. Have you or any occupant of the property been informed of the past or current existence of hazardous substances or petroleum products or environmental violations with respect to the property or any facility located on the property?
 YES NO UNKNOWN
 If yes, please specify: _____

16. Do you or any occupant have any knowledge of any environmental site assessment of the property or facility that indicated the presence of hazardous substances or petroleum products or contamination of the property, or recommended further assessment of the property?
 YES NO UNKNOWN
 If yes, please specify: _____

17. Do you or any occupant of the property know of any past, threatened or pending lawsuits or administrative proceedings concerning a release or threatened release of any hazardous substance or petroleum products involving the property by any owner or occupant of the property?
 YES NO UNKNOWN
 If yes, please specify: _____

18. Does the property discharge waste water on or adjacent to the property other than storm water into a sanitary sewer system?

YES NO UNKNOWN

If yes, please specify: _____

19. To the best of your knowledge have any hazardous substances or petroleum products, unidentified waste material, tires, automotive or industrial batteries or any other waste material been dumped above grade, buried and/or burned on the property?

YES NO UNKNOWN

If yes, please specify: _____

20. Is there a transformer, capacitor, or any hydraulic equipment for which there are any records indicating the presence of PCB's (polychlorinated biphenyls)?

YES NO UNKNOWN

If yes, please specify: _____

21. Are you aware of any prior environmental site assessments (Phase I or II) that have been conducted on the property? If so, please indicate the approximate date and location of the report or a copy if available.

Acknowledgement By The Applicant:

I acknowledge that I have read this questionnaire, and have responded to the issues and questions posed therein to the best of my knowledge.

Date

Borrower Signature

Comment and Recommendation of the Lender:

A visit of the site located at _____ was conducted by (name) _____
_____ who is the (title) _____ of the (lender) _____
_____ on (date) _____. Based on that site visit and the information contained in the questionnaire it is the lender's recommendation that:

_____ An environmental study be completed prior to closing the loan.

_____ An environmental study is not necessary.

Comments: _____

Date

Lender

By:

Its: