

# COMMERCIAL LOAN APPLICATION

**IMPORTANT INFORMATION ABOUT OPENING A NEW ACCOUNT:** Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. In some cases, we may use outside sources to confirm the information. When you open an account, or apply for a new loan on or after May 11, 2018, we will be required to provide information about your beneficial owners. A beneficial owner is: (a) each individual who owns 25% or more of the company and/or (b) one individual who has significant managerial responsibility for the company. You will be required to provide the name(s), address(es), date(s) of birth and other identifying information for each beneficial owner. The information you provide will be kept confidential and secure.

**BORROWING INTENT:**

Borrowing intent should be evidenced when each individual is applying with the applicant for shared or joint credit (e.g. individual is a co-borrower with a business or two individuals are borrowing together). This intent is not completed for guarantors.

**Please Check One:**

- Individual Credit: Relying solely on my income.  Individual Credit: Relying on my income and income from other sources.  
 Joint Credit: We intent to apply for joint credit. Initials \_\_\_\_\_

**BORROWING ENTITY INFORMATION**

Type of Entity: <i>Check one</i>	<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole proprietorship <input type="checkbox"/> LLC	<input type="checkbox"/> Individual <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Non-Profit
Legal Name: _____	Year Established: _____	
Tax Identification Number: _____	Mailing Address: _____	
Street Address: <i>No P.O. Boxes</i>	City, State, ZIP	City, State, ZIP
<input type="checkbox"/> Check here if your street and mailing addresses are the same.		
Telephone Number: _____	Primary Contact Name: _____	
Description of Business: _____		

**ADDITIONAL BORROWER INFORMATION**

Co-Borrower #1:	Co-Borrower #2:	Co-Borrower #3:
Name: _____	Name: _____	Name: _____
Address: _____	Address: _____	Address: _____
DOB: _____	DOB: _____	DOB: _____
SSN/TIN: _____	SSN/TIN: _____	SSN/TIN: _____
Telephone: _____	Telephone: _____	Telephone: _____

**BUSINESS ID INFORMATION**

ID TYPE	ISSUE STATE	ISSUE DATE	ID NUMBER
<input type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Certificate of Good Standing <input type="checkbox"/> Partnership Agreement <input type="checkbox"/> Trust Instrument <input type="checkbox"/> Other			

**BUSINESS OPERATIONS INQUIRY**

Do you cash checks?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If you cash checks, do you cash more than \$1,000 per person per day?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you sell money orders?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you transmit money? (e.g. wire transfers, Western Union, virtual currency, cryptocurrency, etc.)	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you exchange currency and/or bullion?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you primarily transact business in cash?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you engage, directly or indirectly, in a marijuana-related business?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you engage in internet gambling?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you own, operate or lease ATMs?	<input type="checkbox"/> YES <input type="checkbox"/> NO

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<b>LOAN REQUEST</b>					
Purpose:	<input type="checkbox"/> Purchase <input type="checkbox"/> Purchase/Rehab <input type="checkbox"/> Refinance Cash-Out <input type="checkbox"/> Refinance No Cash-Out	<input type="checkbox"/> Improvement <input type="checkbox"/> Construction <input type="checkbox"/> Spec. Const. <input type="checkbox"/> Development	<input type="checkbox"/> Equipment <input type="checkbox"/> Line of Credit: <input type="checkbox"/> Other: _____		
Type:	<input type="checkbox"/> Conventional <input type="checkbox"/> Balloon Loan	Amount Requested:	\$		
Term (In Months):		Interest Rate:		%	
<b>COLLATERAL</b>					
Collateral Description:					
Collateral Address, if Applicable:					
Lien Position:		Total Existing Liens:			
Lienholder(s):					
Sales Price, if Applicable:		Estimated Value:			
Occupancy:	<input type="checkbox"/> Principal residence <input type="checkbox"/> Secondary residence <input type="checkbox"/> Investment property <input type="checkbox"/> Non-owner occupied CRE	Construction Method:	<input type="checkbox"/> Site-Built <input type="checkbox"/> Manufactured Home Amortization period: _____		
<b>GUARANTOR INFORMATION</b>					
<b>Guarantor #1:</b>		<b>Guarantor #2:</b>		<b>Guarantor #3:</b>	
Name:		Name:		Name:	
Address:		Address:		Address:	
DOB:		DOB:		DOB:	
SSN/TIN:		SSN/TIN:		SSN/TIN:	
Telephone:		Telephone:		Telephone:	
<b>BENEFICIAL OWNERSHIP INFORMATION</b>					
<b>OWNERSHIP PERCENTAGE</b>					
List all individuals who own, directly or indirectly, 25% of the company applying for this loan.					
Name	DOB	Address	SSN/TIN or other ID # <sup>1</sup>	ID Type, Number & Expiration Date	Ownership Percentage
<b>CONTROLLING MANAGER</b>					
Name	DOB	Address	SSN/TIN or other ID #	ID Type, Number & Expiration Date	Title
<b>COMMUNITY DEVELOPMENT CONSIDERATION</b>					
Will the proceeds from this loan support affordable housing for low- and moderate-income individuals?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
Will the proceeds from this loan promote economic development?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
Will the proceeds from this loan revitalize or stabilize low- or moderate-income geographies, designated disaster areas or distressed or underserved areas?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
Will the proceeds from this loan support, enable, or facilitate projects or activities to revitalize or support neighborhood programs in low- or moderate-income areas?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>GROSS ANNUAL REVENUES (In previous fiscal year)</b>					
<input type="checkbox"/> Over \$1 Million			<input type="checkbox"/> Under \$1 Million		

<sup>1</sup> For U.S. Persons: Social Security Number or TIN. For Non-U.S. Persons: Passport number and country of issuance, or similar identification number

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## NOTICES and DISCLOSURES

**Credit Authorization:** I/We authorize the Bank (Lender) to obtain a consumer report, and to obtain and exchange information from and with other credit grantors and consumer reporting agencies. I/We authorize Lender to retain all information and reports for the Lender's files.

**True and Correct:** I/We certify that all statements made in this application are true and correct and that I/We have withheld nothing that would, if disclosed, unfavorably affect this application. The furnishing of false information for the purpose of influencing the Lender's loan decision violates Federal Criminal laws and may subject the violator to fine, imprisonment or both.

**Beneficial Ownership:** I/We certify to the best of my/our knowledge that the beneficial ownership information provided here is complete and current. I/We agree to notify the lender of any changes in beneficial ownership for as long as this extension of credit is outstanding.

**For Loans Secured by a 1<sup>st</sup> Lien on a Dwelling:** We may order an appraisal or valuation to determine the property's value and charge you for this appraisal or valuation. We will provide you copies of the appraisal or valuation promptly upon completed or at least three (3) days prior to closing, whichever is earlier. **You may waive this 3-day timeframe by checking this box:**  . If you waive this timing requirement, we will provide you copies of your appraisal or valuation at closing. We will promptly give you a copy of any appraisal or valuation even if your loan does not close. You can pay for an additional appraisal for your own use at your own cost.

**Credit Denial Notice:** If your gross revenues were \$1,000,000 or less in your previous fiscal year, or you are requesting trade credit, a factoring agreement or similar types of business credit in this Commercial Loan Application, and if your application for credit is denied, you have the right to a written statement of the specific reasons for denial. To obtain this statement, please contact [insert address] within 60 days of the date you were denied. We will send you a written statement of reasons for the denial within 30 days of receiving your request. The notice that follows describes additional protections extended to you.

**Equal Credit Opportunity Act:** 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, age (providing the applicant has the legal capacity to enter into a binding contract), because all or part of the applicant's income is derived from any public assistance program or because the applicant, in good faith, has exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning the Bank is: [insert appropriate address for the Division of Compliance and Consumer Affairs].

## SIGNATURES

Signature	Printed Name	Application Date
Signature	Printed Name	Application Date
Signature	Printed Name	Application Date
Signature	Printed Name	Application Date

**Personal Statement  
Unity National Bank**

Name _____	Spouse's Name _____
Social Security Number _____	Social Security Number _____
Address _____	Business Phone _____
City, State, Zip _____	Residence Phone _____
	Date of Statement _____

ASSETS	Community Assets & Undersigned's Separate Property	Separate Property of Spouse	LIABILITIES	Of Undersigned	Of Spouse
Cash on Hand in Banks (See Schedule A)			Notes Payable to Bank – Secured (See Schedule A)		
U.S. Gov't Securities & Bonds (See Schedule B)			Notes Payable – Unsecured (see Schedule A)		
Listed Securities (See Schedule B)			Notes Payable to Relatives (See Schedule A)		
Retirement Accounts (see Schedule B)			Notes Payable to Others (See Schedule A)		
Unlisted Securities (See Schedule C)			Student Loans Payable (See Schedule A)		
Real Estate Owned-Homestead ( See Schedule D)			Balances on Credit Cards & Other Revolving Accounts		
Other Real Estate Owned (See Schedule D)			Unpaid Taxes		
Accounts & Notes Receivable (List on separate sheet)			Real estate Mortgages Payable (See Schedule D)		
Automobile(s)			Loans Against Life Insurance		
Personal Property			Other Debts - Itemize		
Cash Value Life Insurance (See Schedule e)					
Other Assets –Itemize					
			TOTAL LIABILITIES		
			NET WORTH		
TOTAL ASSETS			TOTAL LIABILITIES & NET WORTH		

Annual Income/ Sources of cash for 20	Of Undersigned	Of Spouse	Annual Expenditures / Users of Cash	Of Undersigned	Of Spouse
Salary			Mortgage / Rental Payments		
Bonus / Commission			Installment Payments (Car Loans, Credit Cards, etc.)		
Dividends & Interest			Taxes – Federal, State, Local & Real Estate		
Real Estate Income			Insurance Payments		
Sale of Assets			Other Expenses (Education, etc.)		
Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. Other Income (list)			Total Expenditures / Uses of Cash		
Total			Excess of Income/Sources of Cash over Expenditures / Uses of Cash		

**Schedule D – Real Estate Owned (Attach separate sheet if necessary)**

Property Type & Number of Units	Address (street, City, State & Zip)	Listed in Name Of	Purchased Price / Year	Total Cost of Improvements	Estimated market Value	Monthly Gross Rental Income	Loan Balance	Mortgage Holder	Interest Rate/ Maturity Date	Mortgage Payment
HOMESTEAD				\$	\$	\$	\$			\$
				\$	\$	\$	\$			\$
				\$	\$	\$	\$			\$
				\$	\$	\$	\$			\$

**Schedule E – Schedule of Life Insurance Carried (Attach separate sheet if necessary)**

Face Amount	Name of Company	Owner of Policy	Separate Property	Pledged as Collateral	Beneficiary	Cash Surrender Value	Loans
\$						\$	\$
\$						\$	\$
\$						\$	\$

**Schedule F – Contingent Liabilities (Attach separate sheet if necessary)**

Name of bank / Creditor	Debt Listed in Name of	Maximum Commitment Amount	Balance Due on Loans	Collateral	Monthly Payment Amount	Interest Rate	Maturity Date
		\$	\$		\$		
		\$	\$		\$		
		\$	\$		\$		

This personal Financial Statement is designed specifically for residents of the State of Texas. In completing this statement, information requested as to undersigned's assets include all community owned assets acquired since marriage as well as all of undersigned's separate property (i.e. property acquired prior to marriage, or individual donated to or inherited since marriage). The undersigned represents that he / she has the authority to bind all of the community property. Information requested as to undersigned's spouse should include only the spouse's separate property. For the purpose obtaining and / or maintaining credit from time to time, in any form whatsoever from the above named Bank, the undersigned submits the following as being true, complete and accurate statement of undersigned's financial condition, as of the date of this statement. The undersigned understands that the Bank will rely on the information provided in this statement when making a credit decision(s). Undersigned agrees to notify Bank immediately and without delay in the event of any change in undersigned's financial condition or in the financial condition of undersigned's spouse (where applicable), which materially reduces the means or ability of undersigned to pay all claims or demands. Undersigned further agrees that, unless the Bank is to notified, Bank may continue to rely upon this Personal Financial Statement as true, complete and accurate statement of the undersigned's financial condition and the financial condition of undersigned's spouse. Undersigned authorizes Bank to obtain such information as Bank may require concerning the information completed herein, including obtaining a consumer credit bureau report on undersigned in connection with undersigned's business loan request or application or in connection with the business loan request or application for which undersigned is or may be a guarantor or endorser. This authorization will also extend to any additional or future business credit reviews as deemed necessary by Bank. Undersigned further agrees that this Personal Financial Statement shall remain property of Bank.

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature (Spouse)

# *Unity National Bank*

## REQUIRED DOCUMENTS CHECKLIST

10/30/2019

To:

In order to review and respond promptly to your loan request, we would need to review the following information:

### **Executive Summary**

- Brief summary of loan request (1 page)

### **Business Financial Statements**

- Year-end Balance Sheet 2016 - 2018
- Year-end Profit/Loss Statement 2016 - 2018
- Interim Balance Sheet & Profit/Loss Statement thru 9/30/2019

### **Other:**

- Copy of tax ID Number
- Copy of Articles/Bylaws or Certificate of Formation, Certificate of Filing
- Copy of driver's license
- resume
- copy of survey on property
- Corporate Borrowing Resolution
- signed and dated personal financial statement
- loan application completed