



SBALENDING.COM

EST. 1993

- Loan Application -

SBA 7(a) Loans
SBA 504 Loans
USDA B&I Loans
Conventional Loans

888-SBA-1101
www.SBALending.com

LOAN PROPOSAL CHECKLIST

Thank you for considering SBALENDING.COM for your lending needs. This checklist is to provide the basic outline on the information necessary in order to analyze your loan request. Please complete the information that is applicable to your request. All forms are provided here within. If you have any questions concerning this information, please do not hesitate to call your SBALENDING.COM at 888.722.1101.

I. Loan Application

_____ Attached application which includes the **Application**, **Business Profile**, and **Management Profile**, to be completed by each partner holding 20% or more Common Stock and/or key management personnel

II. Business Financial Exhibits

_____ Business federal tax returns for three prior years, to include all supporting schedules and statements

_____ Interim business financial statement (year-to-date) – within 30 days of application date

_____ Business Debt Schedule (form enclosed), as of the same date as the interim financial statement

_____ Aging of accounts receivables and accounts payable (balances corresponding to the interim balance sheet)

❖ If the Business is a Startup:

_____ Business Plan and/or Feasibility Study

_____ Month-to-month projections for the first year plus a second year. Please include the assumptions that the projections were based upon, and a pro forma business balance sheet on new businesses (form enclosed)

III. Personal Financial Exhibits

To be completed by each Partner, holder of 20% or more Common Stock and/or key management.

_____ Personal Financial Statement (SBA form 413)

_____ Personal federal tax returns for three prior years, to include all supporting schedules and statements as of date of application

_____ Personal Cash Flow Statement (form enclosed)

IV. Miscellaneous (as applicable)

_____ Executed or Certified Copy of Buy/Sell Agreement

_____ Copy of Franchise Agreement and Offering Circular

_____ Copy of current lease or proposed lease on Facility to be occupied (including APN if available)

_____ Copy of Contract/Bid for work to be done by Contractor, Construction Budget/Plans and Specifications

_____ Copy of Real Estate Purchase Agreement

_____ Legal Entity Documents:

- **Sole Proprietorship** – Fictitious Name Statement or Assumed Name Certificate, as applicable
- **Corporation** – Articles of Incorporation and Bylaws
- **Partnerships** (General or Limited) – Partnership Agreement
- **Limited Liability Company** – Articles of Organization Form (LLC-1) and Operating Agreement
- **Trust** – Trust Agreement with all exhibits and amendment

_____ Description of Collateral

_____ Pre-Paid Appraisal fee should you want an appraisal ordered prior to approval

SBA LOAN APPLICATION

Business Name: _____ Telephone: _____
E-Mail Address: _____ Cell: _____
Website: _____ Fax: _____
Current Address: _____ Tax I.D. _____
City, State, Zip: _____
Type of Business: _____ Date Established: _____
Type of Entity: Corporation Partnership Limited Liability Company Sole Prop. Other _____
Number of Employees: _____ After Loan: _____
Proposed New Address: _____

Proposed Project

Land Purchase / Purchase Price \$ _____
New Construction / Renovations \$ _____
Contingencies \$ _____
Machine & Equipment \$ _____
Furniture & Fixtures \$ _____
Inventory \$ _____
Leasehold Improvements \$ _____
Refinance Existing Debt \$ _____
Working Capital \$ _____
Total Capital Requirements \$ _____

Down Payment Funds

Personal Cash \$ _____
Business Cash \$ _____
Gift \$ _____
Personal Loans \$ _____
Sale of Assets \$ _____
Other (Indicate Source and Amounts Below)
_____ \$ _____
_____ \$ _____
Total Down Payment \$ _____

Down Payment (BORROWER) \$ _____
Loan Amount Requested \$ _____

List any previous SBA or other Federal Government Debt:

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

Ownership Structure (must equal 100%)

Name	Title	Address	SSN	% Ownership

Affiliates (List below business concern that are owned by any 20% owner of the applicant company)

Affiliate Name	Type of Business	Owner Name	% Owner

Additional Information

YES NO

Have you or any officer of your company ever been involved in bankruptcy or insolvency proceedings?

Are you or your business involved in any pending lawsuits?

Are there any outstanding tax liens or judgments filed against you or your company?

Does any applicant or their spouse or any member of their household, or any one who owns, manages or directs your business or their spouses or members of their household work for the Small Business Administration, Small Business Advisory Council, SCORE or ACE, and Federal Agency, or the participating lender?

Does your business presently, or as a result of this loan, engage in export trade?

Authorization To Release Information

I, the undersigned, hereby authorize SBA and/or Lender to make inquiries as necessary to verify the accuracy of the information and statements made to SBA and/or Lender and to determine my credit worthiness. I certify the statements and information contained in all documentation provided are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan.

Signature: _____

Date: _____

Signature: _____

Date: _____

Signature: _____

Date: _____

Signature: _____

Date: _____

Signature: _____

Date: _____

BUSINESS PROFILE (If not attached)

Tell us about your business. If available, provide brochures, news clippings or other materials that explain more about your company, products or services.

Who are your major customers?

Name	Location	Percent (%) of Sales
_____	_____	_____
_____	_____	_____

Who are your major competitors?

Name	Location	Competing Product
_____	_____	_____
_____	_____	_____
_____	_____	_____

Describe Your Company's Competitive Advantage

Describe Future Plans for Growth / Expansion

No Yes _____

Is your business seasonal? (if yes explains how it is managed)

No Yes _____

How will the SBA Loan change or aid the growth of the business?

Signature _____

Date _____

MANAGEMENT PROFILE

To be completed in full by each officer, director, key employee, guarantor or owner of 20% or more. You may attach your education and employment history separately.

Name _____ Birth Date _____ Place _____

U.S. Citizen? _____ YES _____ NO If No, give Alien Registration No. _____

Home Telephone _____ Cell Phone _____ SSN # _____

Email Address _____

Present Residence - From _____ To _____

Address _____ City _____ ST _____ Zip _____

Immediate Past Residence - From _____ To _____

Address _____ City _____ ST _____ Zip _____

Please answer these next three questions.	(*If YES, please provide the details.)	YES	NO
Are you presently under indictment, on parole or probation?		_____	_____
Have you ever been charged with or arrested for any criminal offense other than a minor motor vehicle violation?		_____	_____
Have you ever been convicted of any criminal offense other than a minor motor vehicle violation?		_____	_____

Education History (if not attached)

Institution _____

Dates _____ Degree _____

Employment Experience for prior Ten Years (if not attached)

Employer/Location _____ Business Type _____

From _____ To _____ Position _____

Responsibilities _____

Employer/Location _____ Business Type _____

From _____ To _____ Position _____

Responsibilities _____

Employer/Location _____ Business Type _____

From _____ To _____ Position _____

Responsibilities _____

Signature _____

Date _____

PERSONAL CASH FLOW STATEMENT

Please provide the following information regarding sources and uses of cash during the calendar year and your projections for the current year. If a cash flow deficit exists, explain how the existing or requested debt will be serviced.

Applicant Name _____

Individual Statement

Joint Statement

Sources of Cash (Annual)	Prior Year	Current Year Estimate
❖ Salaries, Commissions, Bonuses, or any other income from employment (net)	\$ _____	\$ _____
❖ Rents received	\$ _____	\$ _____
❖ Dividends	\$ _____	\$ _____
❖ Interest Income	\$ _____	\$ _____
❖ Sale of Assets	\$ _____	\$ _____
❖ Royalties	\$ _____	\$ _____
❖ Distributions from Estates & Taxes	\$ _____	\$ _____
❖ Cash distributions from business Partnerships, or joint ventures	\$ _____	\$ _____
❖ Income tax refund	\$ _____	\$ _____
❖ Other sources of cash	\$ _____	\$ _____
TOTAL CASH RECEIVED	\$ _____	\$ _____
Use of Cash (Annual)		
❖ Personal Expenses (Utilities, rent, household, etc.)	\$ _____	\$ _____
❖ Bank Loans – principal & interest	\$ _____	\$ _____
❖ Other loans – principal & interest	\$ _____	\$ _____
❖ Insurance Payments	\$ _____	\$ _____
❖ Income taxes not covered by withholding	\$ _____	\$ _____
❖ Other uses of cash	\$ _____	\$ _____
TOTAL CASH OUTLAYS	\$ _____	\$ _____
CASH FLOW SURPLUS (DEFICIT)	\$ _____	\$ _____

This Cash Flow Statement is a part of my financial statement:

Signature _____

Date _____

SCHEDULE OF BUSINESS DEBT

Company Name _____ Date _____ Signature _____

INDEBTEDNESS: 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). Does 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							

***as of interim balance sheet**

PROJECTED PROFIT/LOSS

Applicant Name _____ Date _____

Please submit month-to-month projections for the first year of operations as well as the total for the second year. You may use this form and/or your own statement. Attach assumptions that the projections were based upon on a separate sheet.

Month:	1	2	3	4	5	6	7	8	9	10	11	12	Total	Year 2
Total Net Sales														
COGS														
Gross Profit														
Variable Expenses:														
Salaries/Wages														
Taxes														
Legal/Accounting														
Advertising														
Automobile														
Office Supplies														
Dues/Subscriptions														
Telephone														
Utilities														
Miscellaneous														
Total Variable Expenses														
Fixed Expenses														
Rent														
Licenses/Permits														
Taxes														
Interest														
Others Expenses														
Total Fixed Expenses														
Total Expenses														
Net Profit before Tax														



PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION

As of _____, _____

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any person or entity providing a guaranty on the loan.

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

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on hand & in Banks.....	\$	Accounts Payable.....	\$
Savings Accounts.....	\$	Notes Payable to Banks and Others	\$
IRA or Other Retirement Account	\$	(Describe in Section 2)	
Accounts & Notes Receivable.....	\$	Installment Account (Auto)	\$
Life Insurance-Cash Surrender Value Only	\$	Mo. Payments \$	
(Complete Section 8)		Installment Account (Other)	\$
Stocks and Bonds.....	\$	Mo. 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	\$
Total.....	\$	Net Worth.....	\$
		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 Note holder(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 Property				
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. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).		
Signature:	Date:	Social Security Number:
Signature:	Date:	Social Security Number:

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.
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PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION

As of _____, _____

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

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on hand & in Banks.....	\$	Accounts Payable.....	\$
Savings Accounts.....	\$	Notes Payable to Banks and Others	\$
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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	\$
Total.....	\$	Net Worth.....	\$
		Total	\$

Section 1. Source of Income

Salary	\$
Net Investment Income	\$
Real Estate Income	\$
Other Income (Describe below)*	\$

Contingent Liabilities

As Endorser or Co-Maker	\$
Legal Claims & Judgments	\$
Provision for Federal Income Tax.....	\$
Other Special Debt.....	\$

Description of Other Income in Section 1.

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