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 Apj	Diffication
	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 a the assumptions that the projections were based upon, and a pro forma business balance sheet on new businesses (form enclosed)
	al Financial Exhibits eleted 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. Miscella	aneous (as applicable)
	Executed of 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				<u></u>
Type of Business				
Type of Entity: Corporation Pa	rtnership	Limited Liabili	ity Company Sole Prop.	Other
Number of Employees:	After	Loan		
Proposed New Address				
Proposed Pr	oject		Dow	n Payment Funds
Land Purchase / Purchase Price	\$	-	Personal Cash	\$
New Construction / Renovations	\$		Business Cash	s
Contingencies	\$		Gift	\$
Machine & Equipment	\$		Personal Loans	\$
Furniture & Fixtures	\$		Sale of Assets	\$
Inventory	\$		Other (Indicate S	Source and Amounts Below)
Leasehold Improvements	\$		8	_ \$
Refinance Existing Debt	\$		Ø 	_ s
Working Capital	\$			
Total Capital Requirements	\$	<u> </u>	Total Down Pay	ment \$
Down Payment (BORROW	ER)	\$		
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 SSN Address Ownership Affiliates (List below business concern that are owned by any 20% owner of the applicant company) Type of % Owner Affiliate Name Owner Name Business **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:

3

Date:

Date:_____

BUSINESS PROFILE (If not attached)

Tell us a company	Tell us about your business. If available, provide brochures, news clippings or other materials that explain more about your company, products of services.								
				_					
	Who are your major customers? Name	Location	Percent (%) of Sales	_					
	Who are your major competitors?	Location	Competing Product						
Describe	e Your Company's Competitive Adv	antage							
Describe	Future Plains for Growth / Expansion			_					
No	Yes								
How wil	ll the SBA Loan change or aid the gr	owth of the business?							
				_					
				_					
Signatu	re		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. Birth Date Place Name U.S. Citizen? YES NO If No, give Alien Registration No. Home Telephone _____ Cell Phone _____ SSN # ____ Email Address Present Residence - From _____ To ____ ____City _____ST ___Zip Immediate Past Residence – From ______ To _____ City ST Zip Address 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) Business Type ____ Employer/Location From To Position Responsibilities Employer/Location ______ Business Type _____ From ______ To _____ Position _____ Responsibilities Business Type Employer/Location 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.

Aŗ	pplicant Name		Individual Statement Joint Statement
So	urces 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	\$	\$
TC	TAL CASH RECEIVED	\$	\$
Us	e 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	\$	\$
TC	TAL CASH OUTLAYS	\$	\$
CA	ASH FLOW SURPLUS (DEFICIT)	\$	\$
Th	is Cash Flow Statement is a part of my financial statement:		
Sig	gnature		Date

SCHEDULE OF BUSINESS DEBT

Company Name		Date		Sign	nature		
INDEBTEDNESS: Furnish the following loan proceeds and reason for paying same							
CREDITOR Name and Address	Original Date	Original Amount	Present* Balance	Interest Rate	Monthly Payment	Maturity Date	Collateral/Security
	-						
	-						
	1		<u> </u>		<u>'</u>		
		to .			4	la	to a

Total Present Balance

^{*}as of interim balance sheet

PROJECTED PROFIT/LOSS

Applicant Name				Date										
Please submit month-to-m Attach assumptions that the	nonth pro	ojections fo	or the firs	t year of op	perations a	is well as t					ise this for	m and/or	your own state	ement.
Month:	1	2	3	4	5	6	7	8	9	10	11	12	Total	Year 2
Total Net Sales														
COGS								10						
Gross Profit														
Variable Expenses:														
Salaries/Wages														
Taxes														
Legal/Accounting														
Advertising														
Automobile														
Office Supplies														
Dues/Subscriptions														
Telephone														
Utiliites														
Miscellaneous	j													
Total Variable Expenses														
Fixed Expenses														
Rent														
Licenses/Permits														
Taxes														
Interest														
Others Expenses														
Total Fixed Expenses														
Total Expenses														
Net Profit before Tax				T.				Ī.	Ī		Ī			



PERSONAL FINANCIAL STATEMENT

nore of voting stock, or (4) any person or entity		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	\$		\$
IRA or Other Retirement Account	\$		
Accounts & Notes Receivable	\$	Installment Account (Auto)	\$
Life Insurance-Cash Surrender Value Only	\$	Mo. Payments \$	\$
(Complete Section 8)		Mo. Payments \$	\$
Stocks and Bonds(Describe in Section 3)	\$	Mortgages on Real Estate	
Real Estate	\$	(Describe in Section 4)	v
(Describe in Section 4)		Unpaid Taxes	\$
Automobile-Present Value	\$	(Describe in Section 6)	
Other Personal Property	\$	Other Liabilities(Describe in Section 7)	\$
(Describe in Section 5)	9	Total Liabilities	\$
Other Assets	\$		
(Describe in Section 5)		Net Worth	\$
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.

Original

Balance

Name and Address of Note holder(s)

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.)

Current

Balance

Payment

Amount

Frequency

(monthly, etc.)

How Secured or Endorsed

Type of Collateral

Number of Shares Name of Securities Cost Quantation Exchange Questition Exchange Quotation Exchange Qu	Section 3. Stocks a	and Bonds. (Use attachme	ents if necessary. Eac	ch attachment must	be identified as a part of this	s statement and signed).						
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					Market Value	Date of	Total Value					
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 Account Number Mortgage Balance Amount of Payment per Month/Year 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 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 7. Other Liabilities. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.) Section 8. Life Insurance Held. (Give face amount and each surrender value of policies - name of insurance company and beneficiaries) Jauthoriza SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditiverthines. Leverify the above and the statements contained in the stratements one 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 testell in forfeiture of benefits and possible prosecution by the U.S. Attentsy Guaral (Reference 18 U.S.C. 1001). Signature: Date: Social Security Number: PLEASE NOTE: The estimated strenge banken loans for the compeletion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspects of this information, please connect Chef. Administrative Branch, U.S. Small Bismers Administration. Weshington D.C. 2001 FLASE SDO SOT SEND FORMS					Quotation/Exchange	Quotation/Exchange						
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		or any other aspect of this Clearance Officer, Paper Re	information, please conta	act Chief, Administrativ	re Branch, U.S. Small Business A	dministration, Washington, D	.C. 20416, and					



PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION	As of,	

Complete this form for: (1) each proprietor, or more of voting stock, or (4) any person or entit			20% or more int	erest and each general par	tner, or (3) each stockholder owning 20%	or
Name	4.00° - 20° - 10°	12-70-2		Business Phone		
Residence Address				Residence Phone		
City, State, & Zip Code						
Business Name of Applicant						
ASSETS	(Omi	t Cents)	1	LIABILITIES	(Omit Cents)	
Cash on hand & in Banks	\$		Accounts Pa	ayable	\$	
Savings Accounts	S	-	Notes Paya	ble to Banks and Others	\$	
IRA or Other Retirement Account	\$		300000	ribe in Section 2)		
Accounts & Notes Receivable	\$		Installment Mo P	Account (Auto) ayments \$	\$	
Life Insurance-Cash Surrender Value Only (Complete Section 8)	\$		Installment	Account (Other)	ss	
Stocks and Bonds	\$		1			
(Describe in Section 3)			Mortgages	on Real Estate	\$	
Real Estate	\$			ribe in Section 4)		
(Describe in Section 4)			(Desc	ribe in Section 6)	\$	
Automobile-Present Value					\$	
Other Personal Property(Describe in Section 5)	\$	-	(Desc	ribe in Section 7)		
Other Assets	¢		Total Liabil	lities	\$	
(Describe in Section 5)	50	80	Net Worth		S	
Total	\$			Total	\$	
Section 1. Source of Income			Contingen	t Liabilities		
Salary	\$		As Endorse	er or Co-Maker	s	_
Net Investment Income	\$	=======================================	Legal Clair	ns & Judgments	\$	
Real Estate Income	\$		Provision f	or Federal Income Tax	\$	_
Other Income (Describe below)*	\$		Other Spec	ial Debt	S	5
Description of Other Income in Section 1.			'			
•						
*Alimony or child support payments need not be disc	losed in "Other Inco	me" unless it is desi	red to have such pa	nyments counted toward total	income.	_
Section 2. Notes Payable to Banks and Other	rs. (Use attachments	s if necessary. Each a	attachment must be	e identified as a part of this st	atement and signed.)	
Name and Address of Note holder(s)	Original	Current	Payment	Frequency	How Secured or Endorsed	
	Balance	Balance	Amount	(monthly, etc.)	Type of Collateral	_

Section 3. Stocks an	d Bonds. (Use attachme	nts if necessary. Each	attachment must be	e identified as a part of thi	s statement and signed).	
Number of Shares	Name of Se	ecurities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value
				Quotation/L'achange	Quotation/Exchange	
Section 4. Real Esta	te Owned			ent if necessary. Each attach	ment must be identified as	a part of this
Section 4. Real Esta	te Owned.	statement and signed Property		Property B	Pro	operty C
Type of Departure		Tropert	уА	Hopeity B	110	эрену С
Type of Property						
Address						
Data Durahagad						
Date Purchased						
Original Cost						
Present Market Value						
Name & Address of M	fortgage Holder					
Mortgage Account Nu	mber					
Mortgage Balance						
Amount of Payment p	er Month/Year					
Status of Mortgage						
	sonal Property and Othe	D. Assots D	ascribe and if any is	pledged as security, state na	ma and address of lien hold	er amount of lien
Section 3. Other Ters	sonai i roperty and Othe			delinquent, describe delinq		er, amount or nen,
Section 6. Unpaid T	axes. Describe in deta	ail as to type to whom	navable when due a	amount, and to what property	y if any a tax lien attaches)
section of Chipman	unes. (Deserree in dea	in, as to type, to whom	payaore, when due, e	amount, and to what propert	,, ir arry, a tare from attaches.)
Section 7. Other Lia	abilities. (Describe in deta	ail.)				
	,	,				
Section 8. Life Insur	rance Held. (Give face a	mount and cash surrence	der value of policies -	name of insurance company	y and beneficiaries)	
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guaranteeing a loan.	ined in the attachments a I understand FALSE sta	re true and accurate as atements may result in	s of the stated date(s) n forfeiture of benefi	These statements are mad ts and possible prosecution	e for the purpose of either by the U.S. Attorney Gen	eral (Reference 18
U.S.C. 1001).						
Signature:			Date:	Social	Security Number:	
<i>6</i>						
Signature:			Date:	Social	Security Number:	
DIFACENOTE	The estimated and 1 - 1	on house for the same	- of this formaid to	TC 1		- 4hin andinanta
	or any other aspect of this i	nformation, please contac	t Chief, Administrative	ars per response. If you have que Branch, U.S. Small Business A ent and Budget, Washington, D.G	dministration, Washington, D.	C. 20416, and
	TO OMB.		o, office of Manageme	and Budget, Washington, D.C	2000. 1 122101 10 1101 5	LI DI ORGIO