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## BUSINESS LOAN APPLICATION

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Thank you for considering your Credit Union for your business borrowing needs. Your Credit Union will be utilizing the services of Cooperative Business Services, LLC (“CBS”) to process, underwrite and service your member business loan. In order for your Credit Union to provide a timely response to your business loan request, please complete the attached forms and return them directly to CBS or your Credit Union.

- COMPANY INFORMATION** form
  - MANAGEMENT/OWNER BIOGRAPHICAL BACKGROUND** form for each owner of 20% or more of the company
  - PERSONAL FINANCIAL STATEMENT** for each owner of 20% or more of the company
  - PERSONAL BUDGET ANALYSIS** for each owner of 20% or more of the company
  - BUSINESS DESCRIPTION** form
  - SCHEDULE OF BUSINESS DEBT** form
  - BUSINESS LOAN APPLICATION ACKNOWLEDGMENT and AGREEMENT** form
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In addition to the above application forms, please provide the following information:

- Personal income tax returns for the last three years for each owner of 20% or more of the company
  - Business income tax returns for the last three years if organized as a corporation or partnership
  - Business financial statements for the last three years, if available
  - Most recent interim financial statements
  - Projections for the next two fiscal years
  - \_\_\_\_\_
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Please contact CBS at [1-888-697-9555](tel:1-888-697-9555) if you have any questions regarding requested information.



# Cooperative Business Services, LLC

## COMPANY INFORMATION

Business Name \_\_\_\_\_ E-mail Address \_\_\_\_\_  
 Address \_\_\_\_\_ County \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_ Mobile Phone # \_\_\_\_\_  
 Business Industry \_\_\_\_\_ Telephone \_\_\_\_\_  
 Key Contact \_\_\_\_\_ Fax \_\_\_\_\_  
 Tax ID Number \_\_\_\_\_ Date Established \_\_\_\_\_

Please provide the following information:

Number of Employees at Present Time \_\_\_\_\_ After this Loan \_\_\_\_\_

## USE OF PROCEEDS

Real Estate Acquisition \$ \_\_\_\_\_  
 Real Estate Improvements \$ \_\_\_\_\_  
 Real Estate Refinance \$ \_\_\_\_\_  
 Machinery & Equipment Acquisition \$ \_\_\_\_\_  
 Business Acquisition \$ \_\_\_\_\_  
 Working Capital / Cash Out \$ \_\_\_\_\_  
 Debt Refinance (other than Real Estate) \$ \_\_\_\_\_  
**Total Financing Required** \$ \_\_\_\_\_  
     Less Borrower's Down Payment \$ \_\_\_\_\_  
     Less Seller Carry Back \$ \_\_\_\_\_  
**Total Loan Requested** \$ \_\_\_\_\_

## OWNERSHIP & MANAGEMENT

Please provide a listing of Owners, Officer Titles, and Ownership Percentages at time of loan closing.

<u>OFFICER TITLE</u>	<u>PRINCIPAL</u>	<u>OWNERSHIP %</u>
1) _____	_____	_____ %
2) _____	_____	_____ %
3) _____	_____	_____ %
4) _____	_____	_____ %
		100 %

If you are applying for an SBA loan, and there have been any ownership changes in the last six months, please provide the following details:

Name \_\_\_\_\_ Current Ownership \_\_\_\_\_ % Previous Ownership \_\_\_\_\_ %  
 Name \_\_\_\_\_ Current Ownership \_\_\_\_\_ % Previous Ownership \_\_\_\_\_ %  
 Name \_\_\_\_\_ Current Ownership \_\_\_\_\_ % Previous Ownership \_\_\_\_\_ %

If this person or persons owned 20% or more of the company within the last six months, they may be required to provide a guaranty and further information regarding their financial condition.

(continued on reverse side)



COMPANY INFORMATION (CONT.)

AFFILIATE BUSINESS

List below all business concerns in which the applicant or any of the individuals listed in the ownership section above have any ownership.

Table with 3 columns: Company Name, Owner, % of Ownership. Includes three rows of blank lines for entry.

NAME VERIFICATION

You will be executing legal documents for your loan request. Please TYPE or PRINT your company's legal name and your legal name as it should appear on all documents.

COMPANY NAME: \_\_\_\_\_

STRUCTURE: ? Corporation ? Partnership ? Sole Proprietor ? LLC

INDIVIDUALS:

Table for individual names with 3 columns: (First Name), (Middle Name/Initial), (Last Name). Includes five rows of blank lines for entry.

I certify to the best of my knowledge that the information contained herein is true and correct.

By: \_\_\_\_\_ Date: \_\_\_\_\_

(continued on next page)



**COLLATERAL DETAIL:**

Collateral Being Pledged For This Loan: \_\_\_\_\_  
\_\_\_\_\_

Lien Position Availability on Collateral Pledged: \_\_\_\_\_  
\_\_\_\_\_

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**COMPANY INFORMATION (CONT.)**

**BUSINESS SERVICES &  
REFERENCES**

**Name of Your Company's  
CPA/Bookkeeper**

Name of Firm \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
Street City State Zip

**Name of Your Company's Attorney**

Name of Firm \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
Street City State Zip

**Name of Your Company's  
Commercial Real Estate or  
Business Broker**

Name of Firm \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
Street City State Zip

**Name of Your Insurance Company  
and Key Contact**

Name of Firm \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
Street City State Zip

My signature below authorizes you to contact any of the professionals listed above and to obtain any information necessary to effectively process my loan request.

\_\_\_\_\_  
Borrower Signature

\_\_\_\_\_  
Date



**MANAGEMENT/OWNER  
BIOGRAPHICAL BACKGROUND**

(To be completed in full by each officer, director, key employee or owner of 20% or more of the company;  
if an item is not applicable, please so indicate)

**PERSONAL INFORMATION** (The spouse is asked to complete separately if owner of 20% or more of borrowing entity).

Name \_\_\_\_\_ SS# \_\_\_\_\_  
                     First                    Middle                    Maiden                    Last  
 Place of Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_ E-mail Address \_\_\_\_\_  
 Marital Status \_\_\_\_\_ Spouse's Name \_\_\_\_\_  
   First                    Middle                    Last                    SS#  
 U.S. Citizen ? Yes ? No If no, give Alien Registration Number \_\_\_\_\_  
 Current Home Address \_\_\_\_\_  
   Street                    City                    State                    Zip  
 Current Home Phone ( ) \_\_\_\_\_ Current Bus. Phone ( ) \_\_\_\_\_ Here From \_\_\_\_\_  
 Immediate Past Home \_\_\_\_\_  
   Street                    City                    State                    Zip  
 Dates There From \_\_\_\_\_ Until \_\_\_\_\_  
                                     Month                    Year                                    Month                    Year

**EMPLOYMENT HISTORY** (List chronologically, beginning with current employment).

**Company Name** \_\_\_\_\_ **Type of Business** \_\_\_\_\_  
 Address \_\_\_\_\_  
                     Street                    City                    State                    Zip  
 Position/Duties \_\_\_\_\_  
 Here From \_\_\_\_\_ Until \_\_\_\_\_  
                     Month                    Year                                    Month                    Year  
**Company Name** \_\_\_\_\_ **Type of Business** \_\_\_\_\_  
 Address \_\_\_\_\_  
                     Street                    City                    State                    Zip  
 Position/Duties \_\_\_\_\_  
 Here From \_\_\_\_\_ Until \_\_\_\_\_  
                     Month                    Year                                    Month                    Year  
**Company Name** \_\_\_\_\_ **Type of Business** \_\_\_\_\_  
 Address \_\_\_\_\_  
                     Street                    City                    State                    Zip  
 Position/Duties \_\_\_\_\_  
 Here From \_\_\_\_\_ Until \_\_\_\_\_  
                     Month                    Year                                    Month

**EDUCATION HISTORY**

	Name of Institution	City, State	Degree/Certificate	Year Graduated
High School	_____	_____	_____	_____
College/University	_____	_____	_____	_____
Technical School	_____	_____	_____	_____
Graduate School:	_____	_____	_____	_____

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**MANAGEMENT/OWNER  
BIOGRAPHICAL BACKGROUND  
(CONT.)**

Please provide the following information:

**MILITARY SERVICE** (List branch and years served - rank achieved and any special training, commendations or awards)

- ? Yes    Have you or your business or any business with which you have been associated ever been in  
? No    bankruptcy or insolvency proceedings? If so, please provide details.
- ? Yes    Are you or your business involved in any pending lawsuits? If so, please provide details.  
? No
- ? Yes    Are you or your business presently under indictment, or on parole or probation? If so, please  
provide  
? No    Details.
- ? Yes    Have you ever been charged with or arrested for any criminal offense other than a minor vehicle  
? No    violation? If so, please provide details.
- ? Yes    Have you ever been convicted of any criminal offense other than a minor motor vehicle violation?  
? No    If so, please provide details.

If you are applying for an SBA loan, please answer the following questions.

- ? Yes    Do you presently have an SBA loan? If so, who is the lender? Are your payments current?  
? No
- ? Yes    Are you more than 60 days delinquent under the terms of any (a) administrative order, (b) court  
order,  
? No    or (c) repayment agreement that requires payment of child support? If so, please provide details.

I declare under penalty of perjury that these statements are true and correct.

**By:**

**Date:**

# PERSONAL FINANCIAL STATEMENT

As of \_\_\_\_\_ 20 \_\_\_\_\_

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 and each corporate officer and director, or (4) any other person or entity providing a guaranty on the loan.

Name	Business Phone (     )
	Residence Phone (     )
Residence Address	E-mail Address

City, State, & Zip Code \_\_\_\_\_

Business Name of Applicant/Borrower \_\_\_\_\_

\*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

ASSETS	(Omit cents)	LIABILITIES	(Omit cents)
Cash on Hand & in Banks	\$	<b>Accounts Payable</b>	\$
Savings Accounts	\$	Notes Payable to Banks and Others	\$
IRA or Other Retirement Accounts	\$	(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	\$
		Net Worth	
Total	\$	Total	\$

Section 1. Source of Income	(Omit cents)	Contingent Liabilities	(Omit cents)
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.**

**Section 2. Notes Payable to Bank 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

(continued on reverse side)

<b>Section 3. Stocks and bonds.</b> (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
<b>Section 4. Real Estate Owned.</b> (List each parcel separately. Use attachments 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 of Property					
Name of Property Owner					
Date Purchased					
Original Cost					
Present Market Value					
Name of Lender					
Loan Number					
Loan Balance					
Amount of Payment per Month					
<b>Section 5. Other Personal Property and Other Assets.</b> (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).					
<b>Section 6. Unpaid Taxes.</b> (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches).					
<b>Section 7. Other Liabilities.</b> (Describe in detail).					
<b>Section 8. Insurance Held.</b> (Give face amount and cash surrender value of policies - name of insurance and beneficiaries).					
I authorize Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I also authorize the lender to pull a personal credit bureau report. 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 on an SBA loan application may result in forfeiture of benefits, a fine up to \$10,000, or imprisonment for not more than five years, or both, under 18 U.S.C. 1001. FALSE statements on a conventional loan application may result in fines and imprisonment under relevant Federal and State laws.					
Signature:		Date:	Social Security Number:		
Signature:		Date:	Social Security Number:		
Rev. November 2005					



PERSONAL BUDGET ANALYSIS

Revised 11/05

Name \_\_\_\_\_

Name \_\_\_\_\_

INCOME

MONTHLY

Salary (Gross) \_\_\_\_\_

Spousal Salary (Gross) \_\_\_\_\_

\*required only if spouse has ownership in the business otherwise, please leave blank.

Rental Income \_\_\_\_\_

Interest Income \_\_\_\_\_

Other (\_\_\_\_\_) \_\_\_\_\_

Other (\_\_\_\_\_) \_\_\_\_\_

TOTAL MONTHLY INCOME

\_\_\_\_\_

Expenses

MONTHLY

Mortgage Payment/Rent \_\_\_\_\_

Real Estate Taxes \_\_\_\_\_

Auto Loan(s) \_\_\_\_\_

Installment Payments \_\_\_\_\_

Credit Lines/Cards \_\_\_\_\_

Utilities & Telephone \_\_\_\_\_

Insurance \_\_\_\_\_

Food \_\_\_\_\_

Clothing \_\_\_\_\_

Child Care \_\_\_\_\_

Contingent Liabilities \_\_\_\_\_

Federal Income Taxes \_\_\_\_\_

State Income Taxes \_\_\_\_\_

Other (\_\_\_\_\_) \_\_\_\_\_

Other (\_\_\_\_\_) \_\_\_\_\_

TOTAL MONTHLY EXPENSES

\_\_\_\_\_

I/We hereby certify that the above information is valid and correct to the best of my/our knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_



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## BUSINESS DESCRIPTION

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**Briefly describe your business:**

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**Who are the top three customers of your business?**

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**Do any of these customers make up more than 25% of your sales? If yes, who?  
How long has your business had a relationship with the customer(s)?**

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**Who are your major competitors?**

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**How do you differentiate your business from your competitors?**

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**Who are your key employees (name and position) - and how long have they worked for your business?**

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**If applicable, detail the reason for any of the negative trends in your company's financial performance over the last three years.**

**Sales:**

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**Cost of Goods Sold:**

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**General & Administrative Expenses:**

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**Tell us about the succession plan of your company.**

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### Schedule of Business Debt

List Below All Business Fixed Debt, Lines of Credit, Shareholders' Notes, and Capital Leases

Applicant Name \_\_\_\_\_ As of Month Ending \_\_\_\_\_

Creditor	Original Date	Original Balance	Present Balance	Interest Rate	Maturity Date	Monthly Payment	Collateral	Current or Delinquent
TOTAL		\$	\$			\$		

I declare under penalty of perjury that these statements are true and correct.

By: \_\_\_\_\_ Date: \_\_\_\_\_

