

Loan Application



MEMBER FDIC

Check appropriate box	<input type="checkbox"/>	If this is an application for a business credit, complete A, B, C, D, E (if applicable), and H (if applicable).
	<input type="checkbox"/>	If you are applying for a credit in your own name and are relying on your own income or assets, and not the income or assets of another person as the basis for repayment of the credit requested, complete A, B (if applicable), C, D, E (if applicable), and H (if applicable).
	<input type="checkbox"/>	If this is an application for joint credit with (an)other person(s), complete A, B (if applicable), C, D, E (if applicable), and H (if applicable). We intend to apply for joint credit (Sign here): <div style="display: flex; justify-content: space-between; width: 100%;"> _____ APPLICANT _____ CO-APPLICANT _____ CO-APPLICANT </div>
	<input type="checkbox"/>	If this is an application for a personal guaranty, complete A, B (if applicable), C (if applicable), D (if applicable), E, F, and H. If this is an application for a corporate guaranty, complete A, B, C (if applicable), D (if applicable), and G.

To expedite processing of your request, please ensure that this application has been completely filled out and that any additional documents are attached.

A. CREDIT REQUEST - (Attach a separate sheet if necessary)

Business Credit Requested <input type="checkbox"/> Line <input type="checkbox"/> Loan <input type="checkbox"/> Other _____ Amount Requested \$ _____	Term Requested <input type="checkbox"/> 1 Yr <input type="checkbox"/> 2 Yrs <input type="checkbox"/> 3 Yrs <input type="checkbox"/> 4 Yrs <input type="checkbox"/> 5 Yrs <input type="checkbox"/> Other _____	Purpose of Line/Loan <input type="checkbox"/> Refinance / Purchase Property <input type="checkbox"/> Purchase Inventory <input type="checkbox"/> Carry Receivables <input type="checkbox"/> Purchase Business or Equipment <input type="checkbox"/> Other: _____	<input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> Collateral: _____ Guarantor: <input type="checkbox"/> Yes <input type="checkbox"/> No Name: _____
If Property or Business Purchase/Refinance: _____		Purchase Price/Refinance Amount: \$ _____	Cash Down: \$ _____

B. BUSINESS APPLICANT INFORMATION - (Attach a separate sheet if necessary)

Complete Legal Name (under which tax returns are filed)		Doing Business As	Federal Tax ID
Co-Applicant(s) (If any)		Proposed Guarantor(s) (If any)	Business Type (Entity)
Industry Type			
Business Street Address		City	State Zip
Mailing Address, if different		City	State Zip
Business Phone #	Fax #	Date of Establishment:	
Business Contact Name:		Phone #	Current Management Since:
Last Yr's Annual Gross Sales	Last Yr's Annual Gross Profit	Last Yr's Annual Net Profit	Last Yr's Total Assets
\$ _____	\$ _____	\$ _____	\$ _____
Within the past seven years: Has company or any principal owner or guarantor ever declared bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes, when (mm/yy): _____		U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Has company or any principal owner or guarantor ever defaulted on a loan? <input type="checkbox"/> No <input type="checkbox"/> Yes, when (mm/yy): _____		If No, are you a Lawful Permanent Resident Alien: <input type="checkbox"/> Yes <input type="checkbox"/> No	

C. BANKING RELATIONSHIPS

Bank	Checking Account #	Average Balance	Current Balance	Other Account Balance
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____

D. PROVIDE DETAILS OF YOUR CREDIT RELATIONSHIP

Name of Creditor	Type of Loan	Original Amount	Balance Owing *	Monthly payment	Note Date	Maturity Date
		\$ _____	\$ _____	\$ _____		
		\$ _____	\$ _____	\$ _____		

E. PERSONAL INFORMATION ON OWNERS AND GUARANTORS - (Attach a separate sheet if necessary.)

E-1. (Optional)		First Name	M.I.	Last Name	Title	% of Ownership
<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms.						
Drivers License #	Issuance Date	Expiration Date	Social Security # (for applicant)	Name of Employer	Date of Birth	
Residence Street Address		City	State	Zip	Phone #	U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
						If No, are you a Lawful Permanent resident alien: <input type="checkbox"/> Yes <input type="checkbox"/> No
E-2. (Optional)		First Name	M.I.	Last Name	Title	% of Ownership
<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms.						
Drivers License #	Issuance Date	Expiration Date	Social Security # (for applicant)	Name of Employer	Date of Birth	
Residence Street Address		City	State	Zip	Phone #	U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
						If No, are you a Lawful Permanent resident alien: <input type="checkbox"/> Yes <input type="checkbox"/> No
E-3. (Optional)		First Name	M.I.	Last Name	Title	% of Ownership
<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms.						
Drivers License #	Issuance Date	Expiration Date	Social Security # (for applicant)	Name of Employer	Date of Birth	
Residence Street Address		City	State	Zip	Phone #	U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
						If No, are you a Lawful Permanent resident alien: <input type="checkbox"/> Yes <input type="checkbox"/> No

REQUIRED SIGNERS: CORPORATION/LLC - UNLESS OTHERWISE DESIGNATED IN AN ATTACHED RESOLUTION, THE CHAIRMAN, PRESIDENT OR ANY VP AND THE SECRETARY, ASST. SEC., CHIEF FINANCIAL OFFICER OR ASST. TREAT.; PARTNERSHIP - ALL GENERAL PARTNERS; SOLE PROPRIETOR - THE OWNER; LIMITED LIABILITY CO. - UNLESS OTHERWISE DESIGNATED IN ATTACHED ARTICLES OR RESOLUTION, ALL MANAGERS OR (IF NONE) ANY MEMBER; TRUST - ALL TRUSTEES, PRINT NAME AND TITLE NEXT TO AUTHORIZED SIGNATURE.

X	_____	_____	_____	_____
SIGNATURE	PRINT NAME	TITLE	DATE	
X	_____	_____	_____	_____
SIGNATURE	PRINT NAME	TITLE	DATE	
X	_____	_____	_____	_____
SIGNATURE	PRINT NAME	TITLE	DATE	

F. PERSONAL GUARANTY

Agreement by Principal (20% or more) Owners. By signing below, I certify that the information set forth in this application and financial statement in the back about myself is complete and correct, authorize the Bank to check my credit history and answer questions about its credit experience with us; and jointly and severally unconditionally guarantees the repayment of all obligations arising under any loans and lines of credit ("Loans") granted by the Bank to Applicant, as well as any extensions, increases, modifications or renewals of the Loans. I waive the following rights with respect to the Loans and this guarantee: presentment, demand, protest, and notice of protest, dishonor and nonpayment; to require Bank to pursue any remedy or proceed against Applicant, collateral or any other guarantor; notice of any change in the Applicant's financial condition or any additional indebtedness that it incurs; and any defense arising by reason of any defense of the Applicant or another guarantor. I agree that Bank may amend and extend Loans, and that it may release or substitute Loan Parties, guarantors or collateral without notice or my consent. Any current or future indebtedness of the Applicant to any of us shall be subordinated to the indebtedness of the Applicant to the Bank. I agree to pay our attorney's fees in enforcing this agreement.

X

SIGNATURE PRINT NAME TITLE DATE

X

SIGNATURE PRINT NAME TITLE DATE

X

SIGNATURE PRINT NAME TITLE DATE

G. CORPORATE GUARANTY

X

SIGNATURE PRINT NAME TITLE DATE

X

SIGNATURE PRINT NAME TITLE DATE

X

SIGNATURE PRINT NAME TITLE DATE

Fair Credit Notice: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding agreement); because all or part of the applicant's income is derived from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning Commonwealth Business Bank is Federal Reserve Consumer Help Center, P.O. Box 1200, Minneapolis, MN 55480.



H. Financial Statement Individual



MEMBER FDIC

By signing in the front, you certify that the information presented is true and complete. You authorize us to obtain information about you from the IRS and other tax authorities, to check your credit and employment history from time to time and to answer questions from others about our credit experience with you. You also authorize us to obtain your residence address from the Department of Motor Vehicles and waive the confidentiality requirement of Vehicle Code 1808.21. You agree to notify us immediately of any material change in your financial condition while you are a borrower or guarantor on any indebtedness to us.

If married, you may apply for a separate account. You need not provide information about your spouse unless: (a) Your spouse will also be contractually liable for the account; or (b) you want the Bank to consider information about your spouse's income or other community property for the purpose of this application for credit; or (c) you live in California or another community property state."

The following information is a true and accurate statement of the FINANCIAL CONDITION ON _____

- ※ FILL ALL BLANKS WRITING "NO" OR "NONE" WHERE NECESSARY TO COMPLETE INFORMATION.
- ※ PLEASE ATTACH A SEPARATE SHEET IF YOU NEED MORE SPACE TO COMPLETE A DETAIL SCHEDULE.
- ※ LIST ALL AMOUNTS IN DOLLARS. OMIT CENTS.

ASSETS	AMOUNT	LIABILITIES	AMOUNT
Cash in Commonwealth Business Bank (Checking)		Accounts Payable	
Cash in Commonwealth Business Bank (Saving)			
Cash in Other Banks (Schedule 1)		Notes Payable to Commonwealth Business Bank	
Accounts Receivable			
		Note Payable to Others (Schedule 2)	
Notes Receivable (Attach a form if necessary)		Income Taxes Payable	
Mortgages & Deeds of Trust Owned			
Securities Owned		Other Taxes Payable	
Cash Surrender Value of Life Insurance		Loans on Life Insurance	
Real Estate (Schedule 3)		Mortgages or Liens on Real Estate (Schedule 4)	
Automobiles		Installment Contracts Payable	
		Equity Line of Credit	
Personal property		Credit Card	
		Other Liabilities (Detail)	
Other Assets (Detail)			
TOTAL		TOTAL LIABILITIES	
		NET WORTH	

ANNUAL INCOME	AMOUNT	ANNUAL EXPENDITURES	AMOUNT
Employment Income		Property Taxes / Assessments	
		Income and Other Taxes	
Dividends		Mortgage Payments & Interest	
Interest		Other Contract Payments	
Rentals		Insurance	
(Alimony, child support or separate maintenance income may not be revealed if you do not wish to have it considered as a basis for repaying your obligations.) Alimony, child support or separate maintenance received		Living Expense	
		Alimony, child support / maintenance	
		Rent Expense for Residential	
		Other	
Other			
TOTAL INCOME		TOTAL EXPENDITURES	

Schedule 1 – Cash (Attach a separate sheet if necessary)

Schedule 2 - Note Payable to Others

Chkg	Svg	Where Carried (Name of Bank)	Cash Balance	Creditor (Name of Bank)	Int. Rate	Borrowing Terms - Terms, Collateral, etc.	Balance
TOTAL				TOTAL			

Schedule 3 – Real Estate Owned (Show Mortgages or Liens in Schedule 4) (Attach a separate sheet if necessary)

Address and Type of Property	Title in name of	How Held*	Monthly Income (\$)	Cost	Present Market Value (\$)	Total Balance Owed (\$; Details in Sch. 2)
				Purchase Date		
				Date:		
				Date:		
				Date:		
TOTAL				TOTAL		

* How Held Codes	Community Property	Separate Property		
	"CP"	Single Ownership = "SO"	Joint Tenants = "JT"	Tenants in Common = "TIC"

Schedule 4 – Mortgages or Liens on Real Estate (Attach a separate sheet if necessary)

To Whom Payable	How Payable (\$ per mo./yr.)	Interest Rate	Maturity Date	Balance Owing
	Per			
	Per			
	Per			

By signing below, I certify that the information set forth in this financial statement about me is complete and correct. I also represent and warrant to the Bank that the foregoing individual financial statement prepared by Me is full, true and correct as of its date. I agree: (a) that the Bank may rely upon the statement as continuing to be true until notified by me in writing to the contrary; (b) to furnish promptly to the Bank such financial statements and other concerning my affairs, in such form and detail and at such times as the Bank may request; and (c) that if this statement is not true in any material respect or if I or any endorser, guarantor of my indebtedness or obligations to the Bank should die, become insolvent, make an assignment for the benefit of creditors, be subject to any act of bankruptcy, or of receivership or dissolution proceedings, or if my property be attached, garnished, or subject to any other legal process, or if a material change occurs in my financial condition, than at the Bank's election all my indebtedness and obligations, direct or contingent to the Bank shall become immediately due and payable without demand or notice. I authorize the Bank to obtain such information as it may require concerning the statements made by me and to provide information arising from this transaction to others, I agree that the application is the Bank's property whether the credit account is granted or not.

X	X	X	X
SIGNATURE	PRINT NAME	DATE	DATE

