

LOAN APPLICATION FORM



Legal name of your business: _____

DBA name for your business: _____
(DBA – doing business as)

Financing requested: \$ _____ Who referred you to us? _____

Briefly describe your business and what you plan do to with this loan:

Business mailing address:

Business physical address

(if same as mailing address, leave blank):

Other locations: _____

Business telephone:																										
Business cell phone:																										
Business fax:																										

Business email:																															

Business web address: _____

Federal EIN:

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Business start date: _____

DUNS number:

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State of origin: _____

Legal status: Sole proprietorship Incorporated LLC Partnership Non-profit Other

Principal products: _____

List all company affiliations and relationships:

Company Name	Relationship

List all owners of this business and those who serve as officers or directors:

Full Name	Title	Active in Co.?	How long?	% of Co. Owned	SSN	Home Address	Phone

For most recent full business year: Gross sales/revenues \$ _____ Profits/losses \$ _____

Number of employees (including yourself): Full-time _____ Part-time _____ No. of jobs you expect to add: _____

Past due IRS payments? Yes No
 IRS payment plans? Yes No
 Tax liens? Yes No
 Litigations? Yes No

Do you do business online? Yes No
 Is this a home-based business? Yes No
 Facilities: Own Rent
 Operation status: Open full-time Open part-time

COMPANY REFERENCES

Bank name: _____ Branch: _____ Acct. #: _____
 Contact: _____ Phone: _____ Fax: _____
 CPA firm: _____ Branch: _____
 Contact: _____ Phone: _____ Fax: _____
 Law firm: _____ Branch: _____
 Contact: _____ Phone: _____ Fax: _____
 Insurance agent: _____ Branch: _____
 Contact: _____ Phone: _____ Fax: _____

PROPOSED SOURCES AND USES OF FINANCING

Sources	Amount	Uses	Amount
GreatBiz Funding	\$	Equipment	\$
Bank	\$	Leasehold improvements	\$
Equity – other	\$	Working capital	\$
Owner cash contribution	\$	Inventory	\$
Other	\$	Marketing	\$
		Other	\$
Total Sources	\$	Total Uses	\$

Your Total Sources must equal your Total Uses.

SUMMARY OF COLLATERAL

Item	Appraised / Purchase Value	Outstanding Debt / Leases
Land / buildings	\$	\$
Inventory	\$	\$
Accounts receivable	\$	\$
Machinery / equipment	\$	\$
Furniture / fixtures	\$	\$
Real estate	\$	\$
Automobile	\$	\$
Stocks, bonds, etc.	\$	\$
Other	\$	\$
Total Collateral	\$	\$

APPLICATION PROCESS

By signing below, Applicant certifies that the proceeds of any loan made as a result of this application will be used for business or organizational purposes only, and will not be used for personal or consumer purposes. Applicant hereby affirms that he/she does not discriminate on the basis of race, color, religion, national origin, gender, marital status, or age. Applicant hereby acknowledges that (1) no loan officer has authority to commit GreatBiz Funding (GBF) to any loan without prior approval of the GBF CEO and (2) any loan commitment must be in writing and signed by an authorized representative of GBF. GBF is authorized to make all inquiries GBF deems necessary to verify the accuracy of this statement and to determine the creditworthiness of the business or organization. Applicant authorizes GBF to answer questions and inquiries from others seeking credit experience information about the business or organization.

Each individual owner of 20% or more of this business must sign this application and fill in the information requested. For non-profit organizations, please provide this information for the Executive Director, Board Treasurer and/or Board Chair.

Applicant certifies to GreatBiz Funding that (1) all information provided to GBF is correct and accurate, and can be relied upon by GBF, and (2) GBF is authorized to verify or confirm any of the information given, check with credit and personal references, and obtain credit reports in connection with this application and/or review of any facility approved by GBF. Applicant gives permission to all creditors and references to give GBF any information it needs to make a decision in approving a loan facility.

Applicant Signature: _____ Title: _____

Please print name: _____ Date: _____

Applicant Signature: _____ Title: _____

Please print name: _____ Date: _____

Applicant Signature: _____ Title: _____

Please print name: _____ Date: _____

STAFF USE ONLY

- | | |
|---|---|
| <input type="checkbox"/> Resume with references for each key owner/manager | <input type="checkbox"/> Current Accounts Receivable aging |
| <input type="checkbox"/> Form Client Registration form | <input type="checkbox"/> Current Accounts Payable aging |
| <input type="checkbox"/> Current interim company financial statement | <input type="checkbox"/> Trade references: list 3+ name, phone, fax |
| <input type="checkbox"/> Year-end company financial statements, prior 2 years | <input type="checkbox"/> List of all lien holders |
| <input type="checkbox"/> Prior 2 years' tax returns | <input type="checkbox"/> 4506t form |
| <input type="checkbox"/> Business plan / projections | <input type="checkbox"/> Personal financial statement for owner / guarantor |
| <input type="checkbox"/> Credit Report Request Form | <input type="checkbox"/> Household cash flow |
| <input type="checkbox"/> Product information / marketing material | |