

## Apply Today for Your Small Business Loan (page 1 of 3)

Please answer the following application questions and complete the information in its entirety. Then, bring it to your nearest Compass office, sit back and relax. We'll generally answer your request within 24 hours if it is \$50,000 or less, and within 48 hours if it is more than \$50,000.

### Credit Request Profile

For loan requests more than \$50,000 or from businesses less than two years old, see Financial Document Checklist on the back of this form

#### Type of Loan Requested (Please check all that apply.)

- New Loan     Renewal     Partial Renewal

#### CompassWorks Loan Request

- CompassWorks Revolving Credit  
CompassWorks Checking for Overdraft Coverage \_\_\_\_\_  
 CompassWorks Other Loan — amount requested \_\_\_\_\_

#### General Loan Requests

- Line of Credit — Amount requested \_\_\_\_\_  
 Letter of Credit — Amount requested \_\_\_\_\_  
 Term Loan — \_\_\_\_\_ Years — Amount Requested \_\_\_\_\_  
 Real Estate Loan — \_\_\_\_\_ Years — Amount Requested \_\_\_\_\_

#### Payment Method

- Automatic Debit  
10 Digit Compass Business Checking Account No.   
 Payment Book (not available on Lines of Credit)

#### Purpose of Loan Request (Please check all that apply.)

- Accounts Receivable     Vehicle Financing     Improvements  
 Inventory Purchases     Refinance Debt     Other \_\_\_\_\_  
 Equipment Financing     Commercial Real Estate Financing

#### Collateral Provided (Please check all that apply.)

- Unsecured     C.D. or Savings  
 Accounts Receivable     Marketable Securities  
 Inventory     Commercial Real Estate  
 Equipment     Residential Real Estate  
 Vehicle     Other \_\_\_\_\_

### Business Profile

LEGAL NAME (UNDER WHICH TAX RETURNS ARE FILED) \_\_\_\_\_

BUSINESS NAME (IF DIFFERENT FROM LEGAL NAME) \_\_\_\_\_

#### Business Address

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_

#### Type of Business

- Retail     Wholesale     Manufacturer     Service

MUST PROVIDE DESCRIPTION: \_\_\_\_\_

#### Ownership Structure

- Sole Proprietor     Limited Liability Partnership  
 C Corporation     General Partnership  
 S Corporation     Limited Partnership  
 Limited Liability Company     Other \_\_\_\_\_

#### Business Information

Do you currently have a business checking account with Compass?  Yes  No

Do you currently have a business loan with Compass?  Yes  No

Primary bank for business relationship? \_\_\_\_\_

What is the current balance in your other business checking account(s)? \_\_\_\_\_

Date Business Established: \_\_\_\_\_

Current Owner of Business Since: \_\_\_\_\_

Number of Employees: \_\_\_\_\_

Federal Tax ID#: \_\_\_\_\_

Annual Revenues: \_\_\_\_\_ Last fiscal year end: \_\_\_\_\_

Total Assets: \_\_\_\_\_

Please provide details on a separate sheet of paper if your answer is YES to any of the following questions:

Is the business or any principal / owner a party to any claim or lawsuit?  Yes  No

Has the business or any principal owner ever declared bankruptcy?  Yes  No

Is the business or principal thereof an endorser / guarantor / comaker for obligations not listed on its financial statements (including lease obligations)?  Yes  No

If Yes, please indicate total liability: \$ \_\_\_\_\_

Does the business owner owe any taxes for years prior to current year?  Yes  No

If Yes, please indicate amount: \$ \_\_\_\_\_

Are there any delinquent FICA or sales taxes, or ERISA payments?  Yes  No

**Documentation** Acceptable primary identification documents for Non-Individual U.S. Persons/Businesses\* include: (See below for details.)

- Articles of Incorporation     Articles of Organization  
 Assumed Name Certificate     Business License/Certificate of Good Standing  
 Certificate of Limited Partnership     Letters Testamentary/Letters of Administration  
 Partnership Agreement     Trust Agreement

STATE OF ISSUANCE (COUNTRY IF NON-USA)    I.D. NUMBER    IF APPLICABLE: ISSUE DATE AND EXPIRATION DATE

\*Non-Individual U.S. Persons/Businesses. A non-individual U.S. Person is any person other than an individual, such as a corporation, partnership, or trust, that is established under the laws of the United States or any State. Because this listing does not encompass all possible entity types, if a customer presents a legal document that is not included in the list of "Acceptable Primary Identification Documents," the document may be used in verifying the customer's identity for purposes of this CIP, and may be added to the listing of Acceptable Primary Identification Documents upon approval from the bank's Legal Department.

Please complete & sign the following 2 pages

**Guarantor Profile** All owners and key decision makers are required to guarantee debt.

**Guarantor #1** \_\_\_\_\_  
LEGAL NAME

\_\_\_\_\_  
SOCIAL SECURITY NUMBER DATE OF BIRTH

\_\_\_\_\_  
LENGTH OF TIME AS OWNER PERCENTAGE BUSINESS OWNERSHIP

\_\_\_\_\_  
I.D. TYPE (e.g. DRIVER'S LICENSE) STATE OF ISSUANCE (COUNTRY IF NON-USA)

\_\_\_\_\_  
I.D. NUMBER ISSUE DATE (IF APPLICABLE) EXPIRATION DATE (IF APPLICABLE)

**Primary Residence**  Own  Rent Time at address: \_\_\_\_\_ yrs.  
( )

\_\_\_\_\_  
RESIDENTIAL STREET ADDRESS HOME PHONE

\_\_\_\_\_  
CITY STATE ZIP

**Financial Information**

\_\_\_\_\_  
PERSONAL NET WORTH (EXCLUDING BUSINESS VALUE) MONTHLY HOUSING PAYMENT ANNUAL INCOME\*\* (INDIVIDUAL ONLY)

**Guarantor #2** \_\_\_\_\_  
LEGAL NAME

\_\_\_\_\_  
SOCIAL SECURITY NUMBER DATE OF BIRTH

\_\_\_\_\_  
LENGTH OF TIME AS OWNER PERCENTAGE BUSINESS OWNERSHIP

\_\_\_\_\_  
I.D. TYPE (e.g. DRIVER'S LICENSE) STATE OF ISSUANCE (COUNTRY IF NON-USA)

\_\_\_\_\_  
I.D. NUMBER ISSUE DATE (IF APPLICABLE) EXPIRATION DATE (IF APPLICABLE)

**Primary Residence**  Own  Rent Time at address: \_\_\_\_\_ yrs.  
( )

\_\_\_\_\_  
RESIDENTIAL STREET ADDRESS HOME PHONE

\_\_\_\_\_  
CITY STATE ZIP

**Financial Information**

\_\_\_\_\_  
PERSONAL NET WORTH (EXCLUDING BUSINESS VALUE) MONTHLY HOUSING PAYMENT ANNUAL INCOME\*\* (INDIVIDUAL ONLY)

**Guarantor #3** \_\_\_\_\_  
LEGAL NAME

\_\_\_\_\_  
SOCIAL SECURITY NUMBER DATE OF BIRTH

\_\_\_\_\_  
LENGTH OF TIME AS OWNER PERCENTAGE BUSINESS OWNERSHIP

\_\_\_\_\_  
I.D. TYPE (e.g. DRIVER'S LICENSE) STATE OF ISSUANCE (COUNTRY IF NON-USA)

\_\_\_\_\_  
I.D. NUMBER ISSUE DATE (IF APPLICABLE) EXPIRATION DATE (IF APPLICABLE)

**Primary Residence**  Own  Rent Time at address: \_\_\_\_\_ yrs.  
( )

\_\_\_\_\_  
RESIDENTIAL STREET ADDRESS HOME PHONE

\_\_\_\_\_  
CITY STATE ZIP

**Financial Information**

\_\_\_\_\_  
PERSONAL NET WORTH (EXCLUDING BUSINESS VALUE) MONTHLY HOUSING PAYMENT ANNUAL INCOME\*\* (INDIVIDUAL ONLY)

**Guarantor #4** \_\_\_\_\_  
LEGAL NAME

\_\_\_\_\_  
SOCIAL SECURITY NUMBER DATE OF BIRTH

\_\_\_\_\_  
LENGTH OF TIME AS OWNER PERCENTAGE BUSINESS OWNERSHIP

\_\_\_\_\_  
I.D. TYPE (e.g. DRIVER'S LICENSE) STATE OF ISSUANCE (COUNTRY IF NON-USA)

\_\_\_\_\_  
I.D. NUMBER ISSUE DATE (IF APPLICABLE) EXPIRATION DATE (IF APPLICABLE)

**Primary Residence**  Own  Rent Time at address: \_\_\_\_\_ yrs.  
( )

\_\_\_\_\_  
RESIDENTIAL STREET ADDRESS HOME PHONE

\_\_\_\_\_  
CITY STATE ZIP

**Financial Information**

\_\_\_\_\_  
PERSONAL NET WORTH (EXCLUDING BUSINESS VALUE) MONTHLY HOUSING PAYMENT ANNUAL INCOME\*\* (INDIVIDUAL ONLY)

\*\* Source and amount of other income (alimony, child support or separate maintenance income) need not be revealed if you do not want to disclose such income and do not want the bank to consider it in its credit decision.

**Financial Document Checklist**

For this loan to be considered complete, the following documents should accompany the signed application.

- I. If your business falls into any ONE of the following three categories, you will need this documentation.
1. All loans > \$50,000, or
  2. Companies in business less than two years, or
  3. Total aggregate debt with Compass (including this request) > \$100 thousand
- A. Required Information
- Small Business Loan Application properly signed and dated
  - Three years Business Tax Returns (Non-proprietors)
  - Three years Personal Tax Returns (All Principals) including all schedules
  - Copy of Invoice or Purchase Contract, if applicable
  - Name and address of insurance company (Not required if unsecured)
  - Personal Financial Statement for all guarantors

- B. Desired Information
- Three years Business Fiscal Year-End Financial Statements including Income Statements and Balance sheets, if applicable.
  - Interim Business Financial Statement (if > 90 days from fiscal year-end)
- II. All Real Estate Loans
- All of the above information PLUS:
- Copy of Purchase Contract (only on new purchases)
  - Copy of Deed
  - Copy of Survey
  - Copy of Mortgage and/or Physical Damage Insurance
  - Name and address of existing mortgage holder, including account number
  - If income producing property: Copies of all leases, projected rental income/expense and, if held in a separate corporation or partnership, two years tax returns

**Business Debts**

Please list all business debts, lines of credit, notes, mortgages and contract/leases payable. If this credit request is to consolidate existing debt, please indicate with an asterisk(\*) those debts that are being paid off.

Bank	Type of Debt	Original Amount	Present Balance	Interest Rate	Maturity Rate	Monthly Payment	Collateral Pledged

**Business Assets**

Please include all business assets, and specify any additional assets owned by this business.

**Current Assets**

**\$ Value**

Cash (Checking/Savings)	
Investments	
Accounts Receivable	
Loans to Owners	
Inventory	

**Fixed Assets**

**\$ Cost**

**\$ Value**

Furniture/Fixtures		
Vehicles		
Machinery and Equipment		
Leasehold Improvements		
Buildings		
Land		

**Guarantor Signature(s)**

Applicant(s) certifies that he/she is authorized to execute this Application on behalf of the business named above, and that all information is complete, true, and correct. Compass will require a guarantee of applicant's obligations by all person(s) signing. Please provide information requested under "ownership profile." Applicant(s) authorizes the Bank to obtain personal, consumer, and/or business credit reports, including inquiries to the Internal Revenue Service, in his/her/their individual name(s) at any time. If the business is a corporation, partnership or a limited liability company, all owners/ principals/members must sign and include their title. All loans subject to credit approval.

_____ SIGNATURE	_____ TITLE	_____ DATE
_____ SIGNATURE	_____ TITLE	_____ DATE
_____ SIGNATURE	_____ TITLE	_____ DATE
_____ SIGNATURE	_____ TITLE	_____ DATE

**INFORMATION FOR BANK USE ONLY**

ORIGINATOR'S NAME _____ <input type="checkbox"/> SBBO <input type="checkbox"/> SBBS <input type="checkbox"/> BCM <input type="checkbox"/> PBO <input type="checkbox"/> FSR	ORIGINATOR'S OFFICER # _____	BOOKING OFFICER NAME _____ <input type="checkbox"/> SBBS <input type="checkbox"/> BCM <input type="checkbox"/> PBO <input type="checkbox"/> FSR	BOOKING OFFICER # _____
ORIGINATING BRANCH NAME _____ PHONE _____	BRANCH # _____ FAX _____	BOOKING BRANCH NAME _____ PHONE _____	BRANCH # _____ COST CENTER # _____ FAX _____
Have visited place of business <input type="checkbox"/> Yes <input type="checkbox"/> No      Date Visited _____      CRA <input type="checkbox"/> Yes <input type="checkbox"/> No      Verified or known customer <input type="checkbox"/> Yes <input type="checkbox"/> No      Initials _____			