



# Options Capital Resources

*financing success since 1996*

## SMALL BUSINESS LOAN APPLICATION

INFORMATION ABOUT YOUR BUSINESS (hereafter known as "Company")						
BUSINESS	TYPE OF BUSINESS:      Sole Proprietorship      LLC      LLP      Partnership      Non Profit Corporation:      S Corp      C Corp      Other				State of Organization	Date Business Established: Current Owner Since: Current Management Since:
	Description of Business (Products / Services Provided)					
	Legal Business Name (applicant)					Federal Tax Identification No.
	Other Names Used by Company (dba)					
	Street Address (Local Offices)-Physical Address		City	County	State	Zip Code
	Statement Mailing Address (if different from Street Address)		City	County	State	Zip Code
	Business Telephone Number:	Business Fax Number:	Annual Gross Sales (last full year)		# Employees	
	Website Address:		Email Address:		Number of Paying Customers	

PLEASE DESCRIBE YOUR LOAN REQUEST			PLEASE DESCRIBE YOUR SECOND REQUEST (Optional)		
LOAN/LINE OF CREDIT REQUEST	Loan Amount:	Loan      Line of Credit	Loan Amount:	Loan      Line of Credit	
	Requested Terms		Requested Terms:		
	If Line of Credit: New Line      Increase (Current Limit      )		If Line of Credit: New Line      Increase (Current Limit      )		
	PURPOSE: General Working Capital/Cash Flow Needs		PURPOSE: General Working Capital/Cash Flow Needs		
	Purchase/Refinance Equipment      Purchase/Refinance Real Estate		Purchase/Refinance Equipment      Purchase/Refinance Real Estate		
	Other      Renewal		Other      Renew		
COLLATERAL:		<u>CURRENT VALUE:</u>	COLLATERAL:		<u>CURRENT VALUE:</u>
Equipment			Equipment		
Accounts Receivable			Accounts Receivable		
Inventory			Inventory		
Vehicles			Vehicles		
Real Estate			Real Estate		
Other			Other		

**INFORMATION ABOUT OWNERS AND GUARANTORS – Please list primary owner first. All 20% or more owners must complete.**

OWNER/GUARANTOR #1										
Optional	Mr.	Mrs.	Ms.	Miss						
Name			Date of Birth			Title		Ownership %		
Residence Address					Years at Address			Own	Rent	Other
City		State		Zip	Home Phone Number			Social Security Number / TIN		
Business Phone Number			Cell Phone Number			Primary Financial Institution				
Driver's License #		State Issued			Monthly Rent/Monthly Mortgage					
PERSONAL FINANCIAL SUMMARY – Owner 1							PERSONAL INCOME SUMMARY – from last Federal Tax Return			
Cash, Savings, CD's, Stocks, Bonds				Vehicle Loans			Wages, Salaries, Tips, etc.			
Retirement Accounts				Revolving Accounts			Business Income (Schedule C)			
Value of House				Other Personal Loans			Schedule E Income			
Other Real Estate Value				Home Mortgage			Other Income (Net)*			
Value of Business				Other Real Estate Mortgage			Total from Tax Return			
Other Assets				Other Personal Liabilities						

*\*Alimony, child support, separate maintenance income, need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.*

OWNER/GUARANTOR #2										
Optional	Mr.	Mrs.	Ms.	Miss						
Name			Date of Birth			Title		Ownership %		
Residence Address					Years at Address			Own	Rent	Other
City		State		Zip	Home Phone Number			Social Security Number / TIN		
Business Phone Number			Cell Phone Number			Primary Financial Institution				
Driver's License #		State Issued			Monthly Rent/Monthly Mortgage					
PERSONAL FINANCIAL SUMMARY – Owner 2							PERSONAL INCOME SUMMARY – from last Federal Tax Return			
Cash, Savings, CD's, Stocks, Bonds				Vehicle Loans			Wages, Salaries, Tips, etc.			
Retirement Accounts				Revolving Accounts			Business Income (Schedule C)			
Value of House				Other Personal Loans			Schedule E Income			
Other Real Estate Value				Home Mortgage			Other Income (Net)*			
Value of Business				Other Real Estate Mortgage			Total from Tax Return			
Other Assets				Other Personal Liabilities						

*\*Alimony, child support, separate maintenance income, need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.*

**INFORMATION ABOUT OWNERS AND GUARANTORS – Continued. All 20% or more owners must complete.**

OWNER/GUARANTOR #3										
Optional	Mr.	Mrs.	Ms.	Miss						
Name			Date of Birth		Title			Ownership %		
Residence Address				Years at Address			Own	Rent	Other	
City		State	Zip	Home Phone Number			Social Security Number / TIN			
Business Phone Number			Cell Phone Number			Primary Financial Institution				
Driver's License #		State Issued			Monthly Rent/Monthly Mortgage					
PERSONAL FINANCIAL SUMMARY – Owner 3						PERSONAL INCOME SUMMARY – from last Federal Tax Return				
Cash, Savings, CD's, Stocks, Bonds			Vehicle Loans			Wages, Salaries, Tips, etc.				
Retirement Accounts			Revolving Accounts			Business Income (Schedule C)				
Value of House			Other Personal Loans			Schedule E Income				
Other Real Estate Value			Home Mortgage			Other Income (Net)*				
Value of Business			Other Real Estate Mortgage			Total from Tax Return				
Other Assets			Other Personal Liabilities							

*\*Alimony, child support, separate maintenance income, need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.*

OWNER/GUARANTOR #4										
Optional	Mr.	Mrs.	Ms.	Miss						
Name			Date of Birth		Title			Ownership %		
Residence Address				Years at Address			Own	Rent	Other	
City		State	Zip	Home Phone Number			Social Security Number / TIN			
Business Phone Number			Cell Phone Number			Primary Financial Institution				
Driver's License #		State Issued			Monthly Rent/Monthly Mortgage					
PERSONAL FINANCIAL SUMMARY – Owner 4						PERSONAL INCOME SUMMARY – from last Federal Tax Return				
Cash, Savings, CD's, Stocks, Bonds			Vehicle Loans			Wages, Salaries, Tips, etc.				
Retirement Accounts			Revolving Accounts			Business Income (Schedule C)				
Value of House			Other Personal Loans			Schedule E Income				
Other Real Estate Value			Home Mortgage			Other Income (Net)*				
Value of Business			Other Real Estate Mortgage			Total from Tax Return				
Other Assets			Other Personal Liabilities							

*\*Alimony, child support, separate maintenance income, need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.*

<b>BANK REFERENCES</b>			
<b>BUSINESS BANK REFERENCES – List the financial institutions where the business depository accounts are maintained.</b>			
Account Type:	Financial Institution:		Average Balance:
Checking      Savings      Other (specify):			
Checking      Savings      Other (specify):			

<b>TELL US ABOUT YOUR BUSINESS DEBT – List all business installment debt, lines of credit, notes, mortgages and contracts/leases payable.</b>							
Credit's Name	Type of Debt	Original Amount	Present Balance	Interest Rate	Maturity Date	Monthly Payment	Collateral Pledged

Please list the total outstanding balance of all other business debt listed above

<b>OTHER INFORMATION – Please answer the following questions for the business and owner(s) /guarantor(s):</b>					
If yes to any of the following questions, please explain.		Business		Personal	
1.	Have there been any bankruptcies or judgments?	Yes	No	Yes	No
2.	Is there pending litigation or any unsatisfied judgments?	Yes	No	Yes	No
3.	Are any taxes currently past due, including payroll & sales tax?	Yes	No	Yes	No
4.	Is any collateral offered OptionsCapital currently pledged to other creditors?	Yes	No	Yes	No
5.	Is the business for sale or under any oral or written agreement that would change ownership?	Yes	No		
6.	Has the business incurred a loss in the last three years?	Yes	No		
7.	Is the business liable on any debts not shown on this application?	Yes	No		

By signing below, the undersigned individual, who is either a principal of the credit applicant or a personal guarantor of its obligations, authorizes Options Capital Resources and their affiliates, successors or its designee (and any assignee or potential assignee thereof) to obtain consumer credit reports relating to his/her individual credit history and/or creditworthiness. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal or extension of such credit or additional credit and for reviewing or collecting the resulting account. A Photostat or facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm my/our identity as the respective individual(s) identified in this application.

**CREDIT RELEASE AUTHORIZATION**

I hereby certify that the information contained in this credit application is true and accurate and I hereby authorize our banks, trade references, and financial institutions the right to release credit information. In states where permissible, I hereby authorize the filing and recording of UCC financing Statements showing the Secured Party's interest in the equipment and grant the Secured Party the right to execute Borrower's/debtors name thereto. A photostat copy of this authorization shall be as valid as the original.

SIGNATURE \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

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