

### SBA OWNER LOAN CHECKLIST

- 1. General Information Form (attached or use your own)
- 2. Operating Company Tax Returns for Trailing Three Years
- 3. Current Interim Profit and Loss Statement And Balance Sheet of the Operating Company (within 60 days) including an Agings of Accounts Receivable and Payable
- 4. Business Debt Schedule (attached or use your own)
- 5. Complete Personal Tax Returns for Trailing Three Years for All Principals (>15% owners)
- 6. Personal Financial Statement (SBA form 413) for All Principals (>15% owners) and debt form
- 7. Resume for Key Principals (attached or use your own)
- 8. Complete credit bureau report with score for each owner (get free at www.creditkarma.com)
- 9. Credit Authorization and Authorization to share information Form (attached)
- 10. Source & Use of funds (include estimates, invoices, & equity cash down payment source)
- 11. Project and Business Summary overview with 3 years projections by month (if<3 years in business)
- 12. SBA Form 1919 on each owner (>15% or more)
- 13. Copy of valid Drivers' License or Governmental ID on panwers of >15%

If you have additional information that you can provide such as a property appraisal, environmental reports, property photos, etc., please include as this will typically help with the approval process.

Please complete, sign, date and return by either:

E-Mail to JemBiz@JemBizLoans.com or via fax to (407) 650-3370





## **General Information Form**

Loan Request Information (Plea	se Complete	All Information	n to Avoi	d De	elays in Proce	ssing Your	Applica	ation)		
Application For:		Purpose of Loan:								
☐Commercial mortgage ☐ SBA		Source of	Repayme	ent:						
☐ Com Inv Property Mtg ☐ Equi	oment Loan	Amount Re	-	: \$						
		Term Requ								
		Amortizati	on Reque	estec	d:					
Collateral Description:						t Value:		Purchase	Price	Date of Purchase
1.					\$			\$ •		
2.					\$			\$		
3.					\$			\$		
A.		Α	pplicant	Info	rmation					
Legal Name of Applicant (Borrower)										
DBA (If Applicable)								Tax I.D. Nun	nber	
Principle Place of Business Address (not P	O Box)									
City	State			1.0	County/Zip Code			Website Add	Iress	
Mailing Address (if different)	Otate							Website Address		
City		State / Zip Coo	10					Company Er	mail	
•		State / Zip Coc	Business Telephone Number				Business Fax Number			
Key Contact Name				( )				( )		DEI
Date Business Established Current ownership (# of years)		5)	State of Registration			Annual Sa \$	ales	Net Profit-prev yr \$		
Describe applicant's product/service								Number o	of Employe	ees
Type of Ownership (Select One) General Partnership Limited Partnership Non Profit Contact E-Mail Address										
☐ Proprietorship ☐ C-Corp. ☐ S-Corp. ☐ LLC ☐ Professional Association ☐ LLP										
Who does applicant currently do their busing	ess banking wi	th?			Is applicant w	illing to move	their ban	nking relation	ship in co	njunction with their loan?
B.		0	wners In	form		110				
					rity Number	%			-	Γitle
Name			Ownership		nip					
Key Contact Name and Phone Number	er									
For more than four owners attach a	dditional she	et(s).	Î.			<u> </u>	1			
C. Loan Disclosures (Refinance)										
Current lender Rate			Start date			onthly yment		Current balance		
							μα	yment		
Property gross annual revenues	,	Annual expense	es	Type of property			mber of		Estimated value	
		-		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		16	, i ai i lò			

D. Loan Disclosures (Purchase)						
Purchase price	Will purchaser occupy 51% or more of the property	Type of property	Down payment		Estimated value	
Property gross annual revenues	Annual expenses	Number of tenants	s Is the property under cor	ntract A	Anticipated settlement date	
				•		
-		Other Informati	10.00			
Е.		Other Informati	on			
Settlement agent name			Insurance Company Phone Nu	mber (	)	
Settlement agent phone number			Insurance Company Fax Numb	er (	)	
Is the seller of the property will	ing to carry a second trust	? (Purchase only)		☐ Yes*	□No	
Has The Applicant Ever Declared Bankruptcy Or Had Any Judgments, Repossessions,  Garnishments Or Other Legal Proceeding Filed Against Them?						
Is the applicant currently under	☐ Yes*	□No				
Are Any Tax Obligations, Include	☐ Yes*	□No				
Is The Applicant Liable On Debts Not Shown, Including Any Contingent Liabilities Such As Leases, Endorsements, Guarantees, Etc.?						
Is The Applicant Currently A Defendant In Any Suit Or Legal Action?						
*If you answered yes to any of the above questions, please provide an explanation on a separate sheet						
F.		Certification And Sig	gnatures			
Each of the undersigned hereby instructs, consents and authorizes the Lender/Broker, or any affiliate, subsidiary or assigns to obtain a consumer credit report and any other information relating to their individual credit status in the following circumstances: (a) relating to the opening of an account or upon application for a loan or other product or service offered by Lender by a commercial entity of which the undersigned is a principal, member, guarantor or other party, (b) thereafter, periodically according to the Lender's review and audit procedures, and (c) relating to Lender's review or collection of a loan, account, or other Lender product or service made or extended to a commercial entity of which the undersigned is a principal, member, guarantor or other party. The Applicant(s), individually and/or by the signature(s) of its authorized representative below, hereby certifies that: the foregoing has been carefully read by the Applicant and is given to the Lender/Broker for the purpose of obtaining the credit described above and other credit from time to time in whatever form; the information in this Application and any other documents or information submitted in connection with this Application or any other credit frequest are true and correct statements of the Applicant's financial condition and may be treated by the bank as a continuing statement thereof until replaced by a new Application or until the Applicant specifically notifies Lender/Broker in writing of any change; and the credit requested herein and any other credit obtained from the Lender/Broker by the Applicant on the basis of the information contained in this Application shall be used solely for business and commercial purposes. The Applicant and each Guarantor authorize the Lender/Broker to verify at an time any information submitted to the Lender/Broker by or on behalf of the Applicant and/or any Guarantor; obtain further information, financial or otherwise, upon request and agrees that, unless otherwise directed by the Applicant in wri						
Unless I/We initial here, the Lender/Broker is hereby authorized to share this application and credit information with its affiliates or other lenders, which may consider my/our application for loan approval/purchase. This statement does not limit the Lender/Broker's rights to sell or assign any loans to a third party.  Applicant and each Guarantor initials:						
Signature (Applicant)	7	Title	Print Name		Date	
Signature (Guarantor)			Print Name		Date	
Signature (Guarantor)		Print Name	Date			

### **BUSINESS DEBT SCHEDULE**

Furnish the following information on all installment debts, contracts, notes, and mortgages payable. Do not include accounts payable or accrued liabilities. \*As of\_\_\_\_\_\_, 20\_\_\_\_ Business Name:\_ \*Should match the financial statement to be submitted. Maturity Original Original Monthly Current or Creditor Present Interest Security Name/address amount date balance rate date payment delinquent Total present Total monthly balance\*\* payment \*\*Total must agree with balance shown on current financial statement Date Signed:\_\_\_\_\_ Signature:\_\_ Title:\_

### PERSONAL RESUME FORM

# TO BE COMPLETED BY EACH PRINCIPAL INVOLVED IN THE LOAN If you already have a prepared resume, submit in lieu of this form

Name				
FIRST	MIDDLE	MAIDEN	LAST	
Date of birth	Place of birth		Social Security N	lo
U.S. Citizen – If not, please provi	de alien registration numbe	r		-
Home address		_ City	State	Zip
From To	)	_ Home phone	Business	phone
Immediate past address		_City	State	Zip
From To	)	_		
Are you employed by the U.S. Go	overnment?			
If so, give the name of the agency	y and position			
Military Service Backgro	und			
Branch		_ From	To	
Rank at discharge		_ Honorable?		
Job Description				
Work Experience				
List chronologically, beginning wit	th present employment			
Name of company		%	of business owned	
Full address		_ City	State	_Zip
From To	)	_ Title	Duties	
Name of company		%	of business owned	
Full address		_ City	State	Zip
From To	)	_ Title	Duties	

Name of company		% of business owned					
Full address		City	StateZip				
			Duties				
Education (College or Tech	nnical Training)						
Name and Location	Dates Attended	Major	Degree or Certificate				
1							
Comments:							
2							
3							
4							

OMB APPROVAL NO.: 3245-0188 EXPIRATION DATE: 05/31/2024



#### PERSONAL FINANCIAL STATEMENT

#### **U.S. SMALL BUSINESS ADMINISTRATION**

The purpose of this form is to collect information about the Business Applicant and its owners' financial condition. SBA uses the information required by this Form 413 as one of a number of data sources in analyzing the repayment ability and creditworthiness of an applicant for an SBA loan or, with respect to a surety bond, to assist in recovery in the event that the contractor defaults on the contract. SBA also uses the information to assess whether an individual meets the economic disadvantage threshold for the Women-Owned Small Business (WOSB) Program and the 8(a) Business Development (BD) Program. Submission of this information is required as part of your application for assistance. Failure to provide the information would impact the agency's decision on your application.

#### To complete this form

- 1) Check all that apply.
- 2) Complete the form in its entirety (attached a separate sheet, if necessary)
- 3) Review the applicable certifications and sign (spousal signature, if required)

#### 7(a) Ioan / 504 Ioan / Surety Bonds

Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant; and (5) any person providing a guaranty on the loan (including the assets and liabilities of the owner's spouse and any minor children).

#### Return completed form to:

For 7(a) loans: the Lender processing the application for SBA guaranty

For 504 loans: the Certified Development Company (CDC) processing the application for SBA guaranty For Surety Bonds: the Surety Company or Agent processing the application for surety bond guarantee

#### Disaster Business Loan Application (Excluding Sole Proprietorships)

Complete this form for: (1) each applicant; (2) each general partner; (3) each managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant business; and (5) any person providing an unlimited guaranty on the loan.

Return completed form to: Disaster Processing and Disbursement Center at 14925 Kingsport Road, Fort Worth, TX 76155-2243 or FAX to 1-202-481-1505 or disasterloans@sba.gov

#### ■ Women Owned Small Business (WOSB) Federal Contracting Program

This form must be completed by each individual claiming economic disadvantage in connection with the SBA's Women-Owned Small Business (WOSB) Federal Contracting Program. A separate form must be completed by the individual's spouse, unless the individual and the spouse are legally separated. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed. In addition, each individual claiming economic disadvantage must update the form as changes arise, but at least annually, to ensure the information is current, accurate and complete.

SBA's regulations state that to be considered economically disadvantaged for purposes of the WOSB Program, a woman must have an adjusted gross income averaged over the three prior fiscal years of \$350,000 or less; less than \$6 million in the fair market value of all her assets (to include her primary residence and value of the business concern); and less than \$750,000 in personal net worth (excluding equity interest in her personal residence and ownership interest in the business, and funds invested in a retirement account that are unavailable until retirement age). 13 C.F.R. §127.203. The information contained in this form must be submitted and certified through beta.certify.sba.gov

#### 8(a) Business Development Program

8(a) applicants must show that 51% of the firm is owned by one or more individuals determined by the SBA to be socially and economically disadvantaged. The information contained in this form must be submitted by each socially and economically disadvantaged individual using their one time 8(a) eligibility to qualify this firm for 8(a) certification. If married, the spouse must complete a separate SBA Form 413, except when the individual and the spouse are legally separated. If separated, provide copy of separation document.

SBA's regulations state that to be considered economically disadvantaged for purposes of the 8(a) Business Development Program, an individual must have an adjusted gross income averaged over the three prior fiscal years of \$350,000 or less; less than \$6 million in the fair market value of all assets (to include primary residence and value of the business concern); and less than \$750,000 in personal net worth (excluding equity interest in the personal residence and ownership interest in the business, and funds invested in a retirement account that are unavailable until retirement age). 13 C.F.R. §124.104.

**Note**: Please complete this form with Personal Information not Business Information and divide all jointly owned assets and liabilities, as appropriate with spouse or others. The information contained in this form must be submitted and certified through certify.sba.gov. For additional information go to: <a href="http://www.sba.gov/8abd">http://www.sba.gov/8abd</a>

Name	Busi	iness Phone (xxx-xxx-xxxx)			
Home Address Home Phone (xxx-xxx-xxxx)					
City, State, & Zip Code					
Business Name of Applicant/Borrower					
Business Address (if different than home addre	ss)				
Business Type: Corporation S-Corp	LLC Partnership	_ Sole Proprietor (does not apply	to ODA applicant)		
This information is current as of [month/day. (within 90 days of submission for 7(a)/504/SBG/O		ıbmission for 8(a) BD)			
WOSB applicant only, Married Yes l	lo .				
ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)		
Cash on Hand & in banks	Notes P (Des Installme Mo. F Installme Mo. F Loan(s) Mortgag (Des Unpaid (Des Other Li (Des Total Lia Net Wor	s Payable			
Salary	As Endo Legal C Provisio Other S	gent Liabilities  preser or Co-Maker	·		

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)									
Names and Addresses of Noteholder(s)		Original Balance	Current Balance	Payment Amount			How Secured or Endorsed Type of Collateral		
Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)								d.)	
Number of Shares Name of Securities		Cost		t Value	-	te of	Total Value		
					Quotation	/Exchange	Quotatioi	n/Exchange	
Section 4. Real Estate and signed.)	Owne	<b>d.</b> (List ea	ich parcel separa	ntely. Use attach	nment if necessary	/. Each attachr	nent must be	identified as a pa	art of this statement
			Property	A	ı	Property B		Pr	operty C
Type of Real Estate (e Primary Residence, Ot Residence, Rental Pro Land, etc.)	her								
Address									
Date Purchased									
Original Cost									
Present Market Value									
Name & Address of Mortgage Holder									
Mortgage Account Nur	nber								
Mortgage Balance									
Amount of Payment pe Month/Year	er								
Status of Mortgage									
Section 5. Other Personal Property and Other Assets. (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.)									
1									

<b>Section 6. Unpaid Taxes.</b> (Describe in detail as to type, to lien attaches.)	whom payable, when due, amou	nt, and to what property, if any, a tax
inch ditudines.)		
Section 7. Other Liabilities. (Describe in detail.)		
Section 8. Life Insurance Held. (Give face amount and ca Beneficiaries.)	ash surrender value of policies – n	ame of insurance company and
I authorize the SBA/Lender/Surety Company to make inquirie determine my creditworthiness.	s as necessary to verify the accur	acy of the statements made and to
<b><u>CERTIFICATION</u></b> : (to be completed by each person submittin more owner when spousal assets are included)	g the information requested on thi	s form and the spouse of any 20% or
By signing this form, I certify under penalty of criminal prosect information submitted with this form is true and complete to the Lenders or Certified Development Companies or Surety Compapilication for a loan, surety bond, or participation in the WOS statements required by law and executive order	ne best of my knowledge. I unders panies will rely on this information	tand that SBA or its participating when making decisions regarding ar
Signature	Date	
Print Name	Social Security No.	
Signature	Date	
Print Name	Social Security No.	

# NOTICE TO 7(a) LOAN, 504 LOAN AND SURETY BOND APPLICANTS: CRIMINAL PENALITIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan or surety bond application. A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 U.S.C. § 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally-insured institution, a false statement is punishable under 18 U.S.C. § 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000. Additionally, false statements can lead to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729, and other administrative remedies including suspension and debarment.

# NOTICE TO DISASTER BUSINESS LOAN APPLICANTS: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Whoever wrongfully misapplies the proceeds of an SBA disaster loan shall be civilly liable to the Administrator in an amount equal to one-and-one half times the original principal amount of the loan under 15 U.S.C. § 636(b). In addition, any false statement or misrepresentation to SBA may result in criminal, civil or administrative sanctions including, but not limited to: 1) fines and imprisonment, or both, under 15 U.S.C. § 645, 18 U.S.C. § 1001, 18 U.S.C. § 1014, 18 U.S.C. § 1040, 18 U.S.C. § 3571, and any other applicable laws; 2) treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729; 3) double damages and civil penalties under the Program Fraud Civil Remedies Act, 31 U.S.C. § 3802; and 4) suspension and/or debarment from all Federal procurement and non-procurement transactions. Statutory fines may increase if amended by the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015.

# NOTICE TO APPLICANTS OR PARTICIPANTS IN THE WOSB FEDERAL CONTRACTING PROGRAM: CRIMINAL PENALITIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Any person who misrepresents a business concern's status as a WOSB or EDWOSB, or makes any other false statement in order to influence the WOSB Program eligibility determination or other review process in any way (e.g., protest), shall be: (1) subject to fines and imprisonment of up to 5 years, or both, as stated in Title 18 U.S.C. § 1001; (2) subject to fines of up to \$500,000 or imprisonment of up to 10 years, or both, as stated in Title 15 U.S.C. § 645; (3) subject to civil and administrative remedies, including suspension and debarment; and (4) ineligible for participation in programs conducted under the authority of the Small Business Act.

# NOTICE TO APPLICANTS OR PARTICIPANTS IN THE 8(a) BUSINESS DEVELOPMENT PROGRAM: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Any person who misrepresents a business concern's status as an 8(a) BD Program participant or SDB concern, or makes any other false statement in order to influence the 8(a) certification or other review process in any way(e.g., annual review, eligibility review), shall be: (1) subject to fines and imprisonment of up to 5 years, or both, as stated in Title 18 U.S.C. § 1001; (2) subject to fines of up to \$500,000 or imprisonment of up to 10 years, or both, as stated in Title 15 U.S.C. § 645; (3) subject to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729; (4) subject to administrative remedies, including suspension and debarment; and (5) ineligible for participation in programs conducted under the authority of the Small Business Act.

PLEASE NOTE:

According to the Paperwork Reduction Act, you are not required to respond to this request for information unless it displays a valid OMB Control Number. The estimated average burden hours for the completion of this form is 1.5 hour per response. If you have questions or comments concerning this estimate or any other aspect of this information collection, please contact: Director, Records Management Division, Small Business Administration, 409 Third Street SW, Washington, D.C. 20416, and SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. PLEASE DO NOT SEND COMPLETED FORMS TO OMB.

### PLEASE READ, DETACH, AND RETAIN FOR YOUR RECORDS

#### Privacy Act (5 U.S.C. 552a) and Debt Collection Improvement Act (31 U.S.C. 7701)

Authorities and Purpose for Collecting Information: SBA is collecting the information on this form, including social security numbers and other personal information, to make a character and credit or other eligibility decision in connection with you or your company's application for SBA assistance. SBA may also use social security numbers for the purpose of collecting and reporting on any delinquent fees or other amounts owed SBA, where applicable.

For purposes of SBA's financial assistance programs, 31 U.S.C. 7701 requires loan applicants and guarantors, or any indemnitor of a surety bond to provide their social security numbers, or other taxpayer identification numbers. Failure to provide this information would affect your ability to obtain an SBA loan or bond. For other individuals signing this form, the submission of the social security number is voluntary and failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. However, your social security number or other taxpayer identification number helps SBA to distinguish you from other individuals with the same or similar name or other personal identifier. This use is permitted under Executive Order 9397. Personal information collected is protected to the extent permitted by law, including the Freedom Information Act, 5 U.S.C. 552, and the Privacy Act 5 U.S.C. 552. Such information is maintained pursuant to SBA's Privacy Act System of Records at https://www.sba.gov/sites/default/files/2020-01/sba-sorns.pdf.

Right to Financial Privacy Act of 1978 (12 U.S.C. 3401) -- This is notice to you as required by the Right to Financial Privacy Act of 1978, of SBA's access rights to financial records held by financial institutions that are or have been doing business with you or your business, including any financial institutions participating in a loan or loan guaranty. The law provides that SBA shall have a right of access to your financial records in connection with its consideration or administration of assistance to you in the form of a Government guaranteed loan or guaranteed bond. SBA is required to provide a certificate of its compliance with the Act to a financial institution in connection with its first request for access to your financial records, after which no further certification is required for subsequent accesses. The law also provides that SBA's access rights continue for the term of any approved loan guaranty agreement or any approved bond agreement. No further notice to you of SBA's access rights is required during the term of any such agreement. The law also authorizes SBA to transfer to another Government authority any financial records included in an application for a loan or bond guarantee, or concerning an approved loan or loan guarantee or bond guarantee, as necessary to process, service or foreclose on a loan guaranty or collect on a defaulted loan guaranty, or to process or service the bond guarantee. No other transfer of your financial records to another Government authority will be permitted by SBA except as required or permitted by law.

#### Freedom of Information Act (5 U.S.C. 552)

This law provides, with some exceptions, that SBA must supply information contained in agency files and records to a person requesting it. Information about approved loans that will be automatically released includes, among other things, statistics on our loan programs (individual borrowers are not identified in the statistics), and other information such as the names of the borrowers (and their officers, directors, stockholders or partners), the collateral pledged to secure the loan, the amount of the loan, its purpose in general terms, and the maturity. With respect to SBA's bond guarantee program, SBA will release, among other things, statistics on the Surety Bond Guarantee (SBG) programs and other information such as the names of small businesses (and their officers, directors, stockholders or partners) and the amount of the bond guarantees. Proprietary data on a borrower would not routinely be made available to third parties. All requests under this Act are to be addressed to the nearest SBA office and be identified as a Freedom of Information request.



### **CREDIT AUTHORIZATION FORM**

The undersigned individual, who is either a principal/owner of the applicant for a business loan, or intends to or is a guarantor of the Company's obligations, provides this written authorization to JEM Business Innovative Solutions (JEMBIZ Loans), together with its affiliates or assigns, authorizing review of the undersigned individual's personal credit profile by inquiry to a national credit bureau. Such authorization shall extend to obtaining a credit profile in consideration of this application and subsequently for the purpose of update, renewal or the extension of such credit or additional credit and for reviewing and collecting the resulting loan, if such loan is made. A Photostat or facsimile copy of this authorization shall be valid as the original. By signature below (either electronic, facsimile or original), I/we affirm our identity as the respective individuals identified in the related business credit application.

This form and authorization shall cease to be valid once an application is withdrawn, or declined and closed, or after any such loan which extends from this application is paid and satisfied in full, or by operation of law.

Company/DBA	
Print Name/Title	SSN
Personal Address/ Residence	City, State and Zip Code
Signed	Date
Print Name/Title	SSN
Personal Address/	City, State
Residence	and Zip Code
Signed	Date
Print Name/Title	SSN
Personal Address	City, State
Residence	and Zip Code
Signed	Date

<u>Please use only complete and legal name(s)</u>, <u>with signature(s) being those of only duly authorized corporate officers(s)</u>, <u>partner(s)</u>, <u>member(s)</u> or <u>proprietor</u>. This authorization also permits JEMBIZ Loans or its assigns to obtain personal bank checking and/or loan account ratings if provided by applicant. Thank you for your cooperation.

### **AUTHORIZATION TO RELEASE INFORMATION**

I/We hereby authorize the release to Lender and/or assigns any and all information Lender and/or assigns may require at any time for any purpose related to our credit application and/or loan transaction with Lender and/or assigns.

I/We hereby authorize LENDER to release any and all information and/or data (including but not limited to personal and/or business financial statements, personal and/or business income tax returns, payment and/or credit history) to any entity LENDER deems necessary for any purpose related to our credit application/loan transaction with LENDER and/or assigns.

Authorized Signature, Title

Authorized Signature, Title

Date

Authorized Signature, Title

Date

Authorized Signature, Title

Date

Authorized Signature, Title

Date

I/We hereby acknowledge that all loan approvals will be in writing and subject to the terms and