



Forum Financial Group, Inc. COMMERCIAL LOAN APPLICATION

This checklist is provided to assist in gathering the necessary information needed for the initial evaluation of your loan request. **Complete information is necessary to process your application.** All applicable forms are provided herewith. If there are any questions concerning this information, please do not hesitate to call your Account Executive with our Commercial Division at (772) 419-2001, Toll Free (877)334-5001, Fax (772) 872-5319.

- Application for Business Loan**
- History of Business and Benefits of Loan**
Provide a narrative of the business containing as much information as possible about start up, ownership, nature of the business and its products/services, marketing and customer profile, major past accomplishments, long term goals, etc. Be sure to explain how the loan for which you are applying will benefit your business. Pictures, brochures or advertisements, a list of key customers and major competitors are helpful exhibits to attach. (For a new business, this information should be in the form of a business plan and/or feasibility study.)
- Business Financial Statements**
Provide a complete copy of Balance Sheets and Income Statements, current within 45 days and for the last three fiscal years. (For a new business, a pro forma balance sheet is required that reflects what you expect the balance sheet position to be on the day the business opens. It should include proposed equity and capital and anticipated loan proceeds.)
- Accounts Receivable and Accounts Payable Aging**
Provide agings as of the current interim financial statement.
- Schedule of Business Debt**
Provide a current business debt schedule as of the current interim financial statement.
- Business Tax Returns**
Provide complete copies with all schedules for the last three fiscal years.
- Projected Income Statement**
Provide projections by month for a minimum of one year if loan proceeds will be used for expansion or for a new business, if business cycle is seasonal, or if trends are erratic. Projections must include detailed assumptions.
- Personal Financial Statement**
Provide current statements within 45 days on all owners, partners, officers, directors, guarantors, and stockholders with 20% more stock ownership. (Additional forms available upon request.)
- Personal Tax Returns**
Provide complete copies with all schedules for the last three years on all owners, partners, officers, directors, guarantors, and stockholders with 20% or more stock ownership.
- Management Resume**
Provide on all owners, partners, officers, directors, guarantors, and stockholders of record. (Additional forms available upon request.)
- Articles of Incorporation/Organization** (filed copies), **Bylaws** (if applicable, amendments), **Certificate of Incorporation/Organization**, **Assumed Name Certificate**, and/or **Partnership Agreement**
- Affidavit of Ownership/Authority**

Request for Copy or Transcript of Tax Return (IRS Form 4506)

Other:

For Business Real Estate Loans:

Purchase Contract/Buy-Sell Agreement

For purchase of owner-occupied real estate, provide a copy of the signed contract and all exhibits/addenda.

New Construction

Provide a copy of the construction contract (“draft” copy of acceptable) and a copy of the plans/specs for the project. If in the planning stages, provide a copy of the initial projected cost analysis.

Refinancing

Provide a complete copy of the note(s) and Deed(s) of Trust on the real estate to be refinanced.

Appraisal

Provide a copy of the most recent real estate appraisal and/or the most recent tax appraisal.

For Business Equipment Loans:

Purchase Order or Invoice

Provide a copy of the purchase order or invoice for machinery or other equipment to be purchased. If the proposed purchase is in the preliminary planning stage, provide a copy of the quote(s).

Refinancing

Provide a complete equipment list with serial numbers of all currently owned machinery or other equipment. In addition, provide a complete copy of the note(s) on machinery or other equipment to be refinanced.

For Business Acquisition Loans:

Purchase contract/Buy-Sell Agreement

Provide a copy of the signed contract and all exhibits/addenda. The contract should provide for the allocation of the purchase price.

Business Financial Statement

Provide complete copies of Seller’s Balance Sheets and Income statements, current within 45 days and for the last three fiscal years.

Business Tax Returns

Provide complete copies of Seller’s Tax Returns for the last three fiscal years.

Request for Copy or Transcript of Tax Return (IRS Form 4506)

This form is to be signed by the Seller.

Other:

Authorization To Release Information

This form is to be signed by all owners, partners, officers, directors, guarantors, and stockholders of record.

Lease(s)

Provide a copy of your existing lease(s) and/or proposed lease(s) as applicable, including all exhibits/addenda.

Franchise Agreement and Uniform Franchise Offering Circular

Provide a copy of these documents as provided by the franchisor.

Affiliate(s)

Provide complete copies of Business Tax Returns with all schedules for the last three fiscal years and a current financial statement within 45 days on affiliate(s).

APPLICATION FOR BUSINESS LOAN

APPLICANT COMPANY

Company Name _____ Telephone: (____) _____

Fax: (____) _____ Email: _____

Address: _____

City: _____ County: _____ State: _____ Zip: _____

Type of Business: _____ Date Established: _____

Type of entity: Corporation Partnership Sole Proprietorship Other

Number of Employees: Existing: _____ If Loan is Approved: _____ Affiliates: _____

Have you or any officer of your company ever been:

Involved in bankruptcy or insolvency proceedings? Yes No (If yes, furnish details in a separate exhibit.)

Currently Exporting? Yes No

Planning to Export? Yes No

Exporting Information Needed? Yes No

Bank Contract: _____ Telephone: (____) _____

Accountant Name: _____ Telephone: (____) _____

Attorney Name: _____ Telephone: (____) _____

Ownership of Applicant Company – List below all officers, directors, partners, owners and co-owners, and all stockholders of record. All (100%) stock ownership must be shown. Include a resume for each person listed below and a personal financial statement if ownership is over 20%.

NAME	TITLE	% OF OWNERSHIP	ANNUAL COMPENSATION

AFFILIATES – List below all business concerns in which the applicant company or any of the individuals listed in the ownership section above have any ownership

COMPANY NAME	OWNER (APPLICANT COMPANY OR INDIVIDUALS)	% OF OWNERSHIP

PREVIOUS GOVERNMENT FINANCING – If you or any principals or affiliates have ever requested government financing (including SBA loans and government guaranteed student loans), complete the following.

NAME OF AGENCY	AMOUNT	DATE	APPROVED OR DECLINED	BALANCE	STATUS

SUMMARY OF PROJECT COST

Land and Improvements \$ _____
 Building Construction \$ _____
 Machinery & Equipment \$ _____
 Inventory \$ _____
 Working Capital \$ _____
 Other _____ \$ _____
 Refinance Existing Debt* \$ _____
Total Project Cost \$ _____
 Less Owners Equity \$ _____
 Less Seller Debt \$ _____
Total Loan Requested \$ _____

COLLATERAL VALUE

Land and Improvements \$ _____
 Machinery & Equipment \$ _____
 Furniture & Fixtures \$ _____
 Accounts Receivable \$ _____
 Inventory \$ _____
 Other _____ \$ _____
Total Collateral Value \$ _____

* Lender _____ \$ _____
 Lender _____ \$ _____
 Lender _____ \$ _____

SOURCE OF COLLATERAL VALUATIONS

AUTHORIZATION TO RELEASE INFORMATION

I/We hereby authorize the release to Forum Financial Group, Inc., Nexus Financial Group, and/or any affiliates of any and all information that they may require for the purpose of a credit transaction. I/We further authorize Nexus Financial Group and/or any affiliates to release such information to any entity they deem necessary for any purpose related to our credit transaction with them.

I/We certify that the enclosed information (plus any attachments or exhibits) is valid and correct to the best of my/our knowledge.

Signature: _____
 Signature: _____
 Signature: _____
 Signature: _____

Date: _____
 Date: _____
 Date: _____
 Date: _____

AFFIDAVIT OF OWNERSHIP/AUTHORITY

I _____ (Name), as _____ (Position)
of _____ (Company Name)
located at _____
do hereby certify that the following is a list of the shareholders/partners/owners, directors, and officers of the
company as of _____ (Date).

Shareholders (Corporation) Partners (Partnership) Owners (Proprietorship) Other _____

%
%
%
%
%

TOTAL = 100%

DIRECTORS:

OFFICERS:

Chairman of the Board _____
President _____
Vice President _____
Secretary _____
Treasurer _____
Other _____
Other _____
Other _____
Other _____

If additional space is required, use back of page

Signature: _____ Title: _____ Date: _____

MANAGEMENT RESUME

(Resume is required for all stockholders of record, and for all owners, partners, officers, directors and guarantors.)

Name: _____ SS#: _____
First Middle (Full) Maiden Last

Date of Birth: _____ Place of Birth: _____

Residence Telephone: (_____) _____ Business Telephone: (_____) _____

Residence Address: _____ From: _____ To: _____
Street City State Zip (MM/YY) (MM/YY)

Previous Address: _____ From: _____ To: _____
Street City State Zip (MM/YY) (MM/YY)

Spouse's Name: _____ SS#: _____
First Middle (Full) Maiden Last

Are you employed by the U.S. Government? Yes No If yes, give agency/position: _____

Are you a U.S. Citizen? Yes No If no, give Alien Registration Number*: _____

Have you ever been charged with or convicted of any criminal offense other than a misdemeanor involving a motor vehicle violation? Yes No If yes, furnish details in a separate exhibit.

Have you ever declared bankruptcy? Yes No If yes, furnish details in a separate exhibit.

Do you have any pending lawsuits? Yes No If yes, furnish details in a separate exhibit.

EDUCATION

NAME AND LOCATION	DATES ATTENDED		MAJOR	DEGREE OR CERTIFICATE
	From	To		
College	MM/YY	MM/YY		
High School	MM/YY	MM/YY		

Did you obtain a government guaranteed student loan for any portion of your education? Yes No

Continuing Education Courses: _____

MILITARY SERVICE BACKGROUND

Branch: _____ From: _____ To: _____ Honorable Discharge? _____

Rank at Discharge: _____ Major Assignment/Accomplishment: _____

WORK EXPERIENCE (List chronologically, beginning with present employment)

Company Name/Address: _____

From: _____ To: _____ Title: _____

Duties: _____

Company Name/Address: _____

From: _____ To: _____ Title: _____

Duties: _____

Company Name/Address: _____

From: _____ To: _____ Title: _____

Duties: _____

Professional Associations, Offices Held, Community Involvement, etc:

Signature: _____ Date: _____

Please attach your own full resume, if applicable *include a copy of Alien Registration Card (front and back)

HISTORY OF BUSINESS AND BENEFITS OF LOAN

(Use separate attachments to answer questions as necessary)

BACKGROUND AND HISTORY OF PRINCIPALS AND COMPANY

NATURE OF BUSINESS, TYPES OF PRODUCTS / SERVICES

CUSTOMER PROFILE

LIST KEY CUSTOMERS

LIST MAJOR COMPETITORS

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MAJOR PAST ACCOMPLISHMENTS

FUTURE EXPANSION

Does your company currently have plans for future expansion? _____

Number of locations? _____ Over what period of time? _____

How many new company locations are planned for this market? _____

HOW WILL THIS LOAN BENEFIT YOUR COMPANY?

WILL THE FUNDING OF THIS LOAN CREATE NEW EMPLOYMENT OPPORTUNITIES?

Signature: _____ Date: _____

PERSONAL FINANCIAL STATEMENT**U.S. SMALL BUSINESS ADMINISTRATION**

As of _____, 20____

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock and each corporate officer and director, or (4) any other person or entity providing a guaranty on the loan.

Name	Business Phone
Residence Address	Residence Phone
City, State & Zip Code	
Business Name of Applicant / Borrower	

ASSETS		LIABILITIES	
(Omit Cents)		(Omit Cents)	
Cash on hand & Banks	\$	Accounts Payable	\$
Savings Accounts	\$	Notes Payable to Banks and Others (Describe in Section 2)	\$
IRA or Other Retirement Account	\$	Installment Account (Auto) Mo. Payment \$	\$
Accounts & Notes Receivable	\$	Installment Account (Other) Mo. Payment \$	\$
Life Insurance-Cash Surrender Value Only (Complete Section 8)	\$	Loan on Life Insurance	\$
Stock and Bonds (Describe in Section 3)	\$	Mortgages on Real Estate (Describe in Section 4)	\$
Real Estate (Describe in Section 4)	\$	Unpaid Taxes (Describe in Section 6)	\$
Automobile – Present Value	\$	Other Liabilities (Describe in Section 7)	\$
Other Personal Property (Describe in Section 5)	\$	Total Liabilities	\$
Other Assets (Describe in Section 5)	\$	Net Worth	\$
Total:	\$	Total:	\$

Section 1. Source of Income		Contingent Liabilities	
Salary	\$	As Endorser or Co-Maker	\$
Net Investment Income	\$	Legal Claims and Judgments	\$
Real Estate Income	\$	Provision for Federal Income Tax	\$
Other Income (Describe below)*	\$	Other Special Debt	\$

Description of Other Income in Section 1.

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted towards total income.

Section 2. Notes Payable to Banks and Others					
(Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)					
Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (Monthly, etc.)	How Secured or Endorsed Type of Collateral
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		

SBA Form 413 (5-91) Previous Editions Obsolete Ref SOP 50-10 and 50-30

Section 3. Stocks and Bonds (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Number of Shares	Name of Securities	Cost	Market Value Quotation / Exchange	Date of Quotation / Exchange	Total Value

Section 4. Real Estate Owned		(List each parcel separately. Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)		
	Property A	Property B	Property C	
Type of Property				
Address	_____	_____	_____	
	_____	_____	_____	
Name of Title Holder				
Date Purchased				
Original Cost				
Present Market Value				
Name & Address of Mortgage Holder	_____	_____	_____	
	_____	_____	_____	
Mortgage Account Number				
Mortgage Balance				
Amount of Payment per Month / Year				
Status of Mortgage				

Section 4. Real Estate Owned		(List each parcel separately. Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)		
	Property D	Property E	Property F	
Type of Property				
Address	_____	_____	_____	
	_____	_____	_____	
Name of Title Holder				
Date Purchased				
Original Cost				
Present Market Value				
Name & Address of Mortgage Holder	_____	_____	_____	
	_____	_____	_____	
Mortgage Account Number				
Mortgage Balance				
Amount of Payment per Month / Year				
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.)

Section 6. Unpaid Taxes (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities (Describe in detail.)

Section 8. Life Insurance Held. (Give face amount and cash surrender value policies – name of insurance company and beneficiaries.)

I authorize SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001)

Signature: _____ Date: _____
Social Security Number: _____

Signature: _____ Date: _____
Social Security Number: _____

PLEASE NOTE: The 69X estimate average burden hours for the completion of this form is 1.5 hours per response. If you have any questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance Office, Paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503