

Business Loan Application

This checklist has been provided to assist you in gathering the necessary information for the initial evaluation of your business loan request. Complete information will be necessary to process your application. Forms are provided for items checked. **Please note that based on the review of your loan application, we will advise you if additional items are required for completion.**

APPLICATION DOCUMENTS

- SBA Loan Request Form.**

Loan Requested - Use of Proceeds.

- SBA Form 1919 Borrowers Form**

Complete for spouse and each partner

Management Resume. Complete for all active principals and key managers (copy form as needed). Discuss your relevant experience, **OR** provide a copy of an existing resume.

- SBA 912 Statement of Personal History**

Personal Cash Flow Page

IRS Form 4506-T - Request for Transcript Return copies of complete Federal Personal tax returns,

Complete and return Fee Invoice and Disclaimer

Copy of ID/DL

Two-Year Projection of Profit and Loss

- Business Plan** (start-up business or business expansion).

Include a description of type of business, management, location/demographic, history of business, etc.

- Tax Returns.** Three most recent years of Personal and business tax returns and YTD Financials, including all notes and attachments for existing business and any affiliates owned.

- Business Tax Returns and Interim P& L's and B/S's**

Three most recent years for business being acquired

- Cash/Equity Injection.** Provide the most recent bank brokerage or other applicable statements to show the source of the cash/equity injection and to support all liquidity (as reflected on SBA Form 413).

IF AVAILABLE, PLEASE PROVIDE THE FOLLOWING:

- Copy of Proposed Purchase Agreement or Executed Purchase Agreement.** Must include cost allocation of all assets being purchased.

Agreement(s) or Letter of Intent.

Copy of Franchise Agreement or Letter of Approval from Franchisor.

- Copies of all Notes, Collateral Documents and Payment History(s) on Debt to Be Refinanced.**
- Copy of Existing or Proposed Lease**

- If not a U.S. citizen, attach **Proof of Resident Alien Status and Acknowledgment Letter.** Photocopy both sides of the Alien Registration card.

SBA Loan Request Form

APPLICANT COMPANY

Company Name _____
DBA (if applicable) _____
Telephone _____
Fax _____
Address _____

City _____ State ____ Zip _____
Email Address _____
Date Established _____
Tax ID# _____

Is the Applicant Company:

the Operating Entity; or Real Estate Holding Company

Type of Applicant Company Organization:

Corporation Sole Proprietorship General Partnership

Limited Partnership or Limited Liability Partnership

Limited Liability Corporation

of Employees: Existing _____
After this Financing _____
Affiliates _____

Have you or any business controlled by you, ever had a lease or loan with The Bancorp Bank or its affiliates?

Yes No

If yes, please describe type(s) of transaction, amount and term:

OWNERSHIP OF APPLICANT COMPANY

List below all owners, partners, LLC members and stockholders totaling 100% of ownership.

Principal 1: Name _____

Title _____
Address _____
City, State, Zip _____
Telephone _____
Email Address _____
Percent of Ownership _____
Date of Birth _____
Social Security No. _____
Most recent date of acquisition of any ownership interest _____

(C t'd. in next column)

(Cont'd. from previous column)

Principal 2:

Name _____
Title _____
Address _____
City, State, Zip _____
Telephone _____
Email Address _____
Percent of Ownership _____
Date of Birth _____
Social Security No. _____
Most recent date of acquisition of any ownership interest _____

Principal 3:

Name _____
Title _____
Address _____
City, State, Zip _____
Telephone _____
Email Address _____
Percent of Ownership _____
Date of Birth _____
Social Security No. _____
Most recent date of acquisition of any ownership interest _____

(If additional owners, please attach a separate sheet.)

AFFILIATES

List below all business concerns in which the applicant company, or any of the individuals listed in the Ownership Section above, has 20% ownership or controlling interest.

Affiliate 1:

Company Name _____
Individual Name _____
Address _____
City, State, Zip _____
Telephone _____
Percent of Ownership _____
Number of Employees _____

Affiliate 2:

Company Name _____
Individual Name _____
Address _____
City, State, Zip _____
Telephone _____
Percent of Ownership _____
Number of Employees _____

(If additional affiliates, please attach a separate sheet.)



Loan Requested - Use of Proceeds

Land/Building Acquisition \$ _____

New Building Construction/Leasehold Improvements \$ _____

Construction Contingency - 10% \$ _____

Construction Soft Costs (Engineering Fees, Tap Fees, etc.) \$ _____

Business Acquisition: Stock Asset \$ _____

Machinery/Equipment Purchase \$ _____

Furniture/Fixtures Purchase \$ _____

Inventory Purchase \$ _____

Refinance Debt: SBA Non-SBA Unknown \$ _____

Pay Trade/Notes Payables \$ _____

Working Capital \$ _____

Franchise Fee \$ _____

Other: _____ \$ _____

Other: _____ \$ _____

Other: _____ \$ _____

Total Estimated Project Amount \$ _____

*Less Cash/Equity To Be Injected \$ _____

**Less Seller Carryback or Other Financing (If Applicable) \$ _____

Total Loan Requested For Project: \$ _____

Please Describe Where Cash/Equity Injections Will Come From:

<u>Income</u>	<u>Verification</u>	
Checking/Savings	3 Months of Bank Statements	\$ _____
Land Equity	Appraisal, Purchase Agreement	\$ _____
Retirement/401k	Account Statements	\$ _____
Home Equity	Appraisal, Account Statements	\$ _____
Monies Already Invested	Receipts, Paid Invoices	\$ _____
Gift Letter	Tax Returns, PFS and 3 Months of Bank Statements from Gift Grantor	\$ _____
Other	Supporting Documentation	
Please Specify: _____		\$ _____



SBA 7(a) Borrower Information Form

For use with all 7(a) Programs

OMB Control No.: 3245-0348

Expiration Date: 07/31/2020

Purpose of this form:

The purpose of this form is to collect information about the Small Business Applicant (“Applicant”) and its principals, the loan request, indebtedness, information about current or previous government financing, and certain other topics. The information also facilitates background checks as authorized by section 7(a)(1)(B) of the Small Business Act, 15 U.S.C. 636(a)(1)(B). This form is to be completed by the Applicant and all individuals identified below and **submitted to your SBA Participating Lender**. Submission of the requested information is required for SBA or the Lender to make a determination regarding eligibility for financial assistance. Failure to submit the information would affect that determination.

Instructions for completing this form:

This form is divided into two sections. Section I requests information about the Small Business Applicant and must be completed in its entirety, signed and dated by an authorized representative of the Small Business Applicant that is requesting a business loan. *A separate Section I is required to be completed and signed for each co-applicant (e.g. “Eligible Passive Company (EPC)” or “Operating Company (OC)”).*

Section II of this form requests information about each of the Small Business Applicant’s principals. This section must be completed in its entirety, signed and dated by the following:

- For a sole proprietorship, the sole proprietor;
- For a partnership, all general partners, and all limited partners owning 20% or more of the equity of the firm; or any partner that is involved in management of the applicant business;
- For a corporation, all owners of 20% or more of the corporation, and each officer and director;
- For limited liability companies, all members owning 20% or more of the company, each officer, director, and managing member;
- Any Person hired by the business to manage day-to-day operations (“key employee”); and
- Any Trustor (if the Small Business Applicant is owned by a trust).

All parties listed above are considered “Associates” of the Small Business Applicant as defined in 13 CFR § 120.10, as well as “principals.” *A separate Section II is required to be completed and signed by each principal of the Small Business Applicant.*

For clarification regarding any of the questions, please contact your Lender.

Definitions:

1. **Affiliation** – Concerns and entities are affiliates of each other when one controls or has the power to control the other, or a third party (or parties) controls or has power to control both. For example, affiliation may arise through ownership, common management (including through a management agreement), or when there is an identity of interest between close relatives with identical, or substantially identical, business interests. The complete definition of “affiliation” is found at 13 CFR § 121.301(f).
2. **Close Relative** - Close Relative is a spouse; a parent; or a child or sibling, or the spouse of any such person.
3. **Eligible Passive Company (“EPC”)** – is a small entity or trust which does not engage in regular and continuous business activity which leases real or personal property to an Operating Company for use in the Operating Company’s business, and which complies with the conditions set forth in 13 CFR § 120.111.
4. **Household Member** – A “household member” of an SBA employee includes: a) the spouse of the SBA employee; b) the minor children of said individual; and c) the blood relatives of the employee, and the blood relatives of the employee’s spouse who reside in the same place of abode as the employee. [13 CFR § 105.201(d)]
5. **Operating Company (“OC”)** – is an eligible small business actively involved in conducting business operations now or about to be located on real property owned by an Eligible Passive Company, or using or about to use in its business operations personal property owned by an Eligible Passive Company.



SBA 7(a) Borrower Information Form
(Section I: Applicant Business Information)

OMB Control No.: 3245-0348
Expiration Date: 07/31/2020

Applicant Business Legal Name (OC / <input type="checkbox"/> EPC)		DBA or Tradename if applicable	
Applicant Business Primary Business Address		Applicant Business Tax ID	Applicant Business Phone
			() -
Project Address (if other than primary business address)		Primary Contact	Email Address

Amount of Loan Request: \$		# of existing employees employed by business? (including owners):	
		# of jobs to be created as a result of the loan? (including owners):	
		# of jobs that will be retained as a result of the loan that otherwise would have been lost? (including owners):	
Purpose of the loan:			

Small Business Applicant Ownership

List all proprietors, partners, officers, directors, and holders of outstanding stock. 100% of ownership must be reflected. Attach a separate sheet if necessary. Based on this form's instructions not all owners will need to complete the Principal Information section of this form.

Owner Name	Title	Ownership %	Address

Unless stated otherwise, if any of the questions below are answered "Yes," please provide details on a separate sheet.

#	Question	Yes	No
1	Are there co-applicants? <i>(If "Yes," please complete a separate Section I: Applicant Business Information for each.)</i>	<input type="checkbox"/>	<input type="checkbox"/>
2	Has an application for the requested loan ever been submitted to the SBA, a lender, or a Certified Development Company, in connection with any SBA program? <i>(If "Yes," provide details on a separate sheet.)</i>	<input type="checkbox"/>	<input type="checkbox"/>
3	Is the Small Business Applicant presently suspended, debarred, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency?	<input type="checkbox"/>	<input type="checkbox"/>
4	Does the Small Business Applicant operate under a Franchise/License/Distributor/Membership/Dealer/Jobber or other type of Agreement? <i>(If "Yes," provide copies of your agreement(s) and any other relevant documents.)</i>	<input type="checkbox"/>	<input type="checkbox"/>
5	Does the Small Business Applicant have any Affiliates? <i>(If "Yes," please attach a listing of all Affiliates.)</i>	<input type="checkbox"/>	<input type="checkbox"/>
6	Has the Small Business Applicant and/or its Affiliates ever filed for bankruptcy protection?	<input type="checkbox"/>	<input type="checkbox"/>
7	Is the Small Business Applicant and/or its Affiliates presently involved in any pending legal action?	<input type="checkbox"/>	<input type="checkbox"/>
8	Has the Small Business Applicant and/or its Affiliates ever obtained a direct or guaranteed loan from SBA or any other Federal agency or been a guarantor on such a loan?	<input type="checkbox"/>	<input type="checkbox"/>
	a) If you answered "Yes" to Question 8, is any of the financing currently delinquent?	<input type="checkbox"/>	<input type="checkbox"/>
	b) If you answered "Yes" to Question 8, did any of this financing ever default and cause a loss to the Government?	<input type="checkbox"/>	<input type="checkbox"/>
9	Are any of the Small Business Applicant's products and/or services exported or is there a plan to begin exporting as a result of this loan?	<input type="checkbox"/>	<input type="checkbox"/>
	If "Yes," provide the estimated total export sales this loan will support: \$ _____		
10	Is the Small Business Applicant using (or intending to use) a packager, broker, accountant, lawyer, etc. to assist in (a) preparing the loan application or any related materials and/or (b) referring the loan to the lender?	<input type="checkbox"/>	<input type="checkbox"/>
11	Are any of the Small Business Applicant's revenues derived from gambling, loan packaging, or from the sale of products or services, or the presentation of any depiction, displays or live performances, of a prurient sexual nature?	<input type="checkbox"/>	<input type="checkbox"/>



SBA 7(a) Borrower Information Form
(Section I: Applicant Business Information)

OMB Control No.: 3245-0348
Expiration Date: 07/31/2020

#		True	False
	SBA may not provide financial assistance to an applicant where there is any appearance of a conflict of interest with an SBA or other governmental employee. With the exception of question 15, <u>if any of the questions below are answered "False," this application may not be submitted under any delegated processing method, but must be submitted to the LGPC for non-delegated processing.</u> Note: This does not mean that your loan will be denied, only that your lender will need to use different SBA procedures to process this loan. If the answer to question 15 is "no," the application may be processed under a lender's delegated authority only after the lender received clearance from SBA.		
12	No SBA employee, or the household member (see definition on page 1) of an SBA employee, is a sole proprietor, partner, officer, director, or stockholder with a 10 percent or more interest, of the Applicant. [13 CFR 105.204]	<input type="checkbox"/>	<input type="checkbox"/>
13	No former SBA employee, who has been separated from SBA for less than one year prior to the request for financial assistance, is an employee, owner, partner, attorney, agent, owner of stock, officer, director, creditor or debtor of the Applicant. [13 CFR 105.203]	<input type="checkbox"/>	<input type="checkbox"/>
14	No member of Congress, or an appointed official or employee of the legislative or judicial branch of the Federal Government, is a sole proprietor, general partner, officer, director, or stockholder with a 10 percent or more interest, or household member of such individual, of the Applicant. [13 CFR 105.301(c)]	<input type="checkbox"/>	<input type="checkbox"/>
15	No Government employee having a grade of at least GS-13 or higher is a sole proprietor, general partner, officer, director, or stockholder with a 10 percent or more interest, or a household member of such individual, of the Applicant. [13 CFR 105.301(a)]	<input type="checkbox"/>	<input type="checkbox"/>
16	No member or employee of a Small Business Advisory Council or a SCORE volunteer is a sole proprietor, general partner, officer, director, or stockholder with a 10 percent or more interest, or a household member of such individual, of the Applicant. [13 CFR 105.302(a)]	<input type="checkbox"/>	<input type="checkbox"/>

By Signing Below, You Make the Following Representations and Certifications

REPRESENTATIONS

I represent that:

- I have read the Statements Required by Law and Executive Order included in this form, and I understand them.
- I will comply, whenever applicable, with the hazard insurance, lead-based paint, civil rights and other limitations in this form.
- All SBA loan proceeds will be used only for business related purposes as specified in the loan application.
- To the extent feasible, I will purchase only American-made equipment and products.

ACCURACY CERTIFICATION

I certify that the information provided in this application and the information that I have provided in all supporting documents and forms is true and accurate. I realize that the penalty for knowingly making a false statement to obtain a guaranteed loan from SBA is that I may be fined up to \$250,000 and/or be put in jail for up to 5 years under 18 USC § 1001 and if false statements are submitted to a Federally insured institution, I may be fined up to \$1,000,000 and/or be put in jail for up to 30 years under 18 USC § 1014.

Signature of Authorized Representative of Applicant Business

Date

Print Name

Title



SBA 7(a) Borrower Information Form
(Section II: Principal Information)

OMB Control No.: 3245-0348
Expiration Date: 07/31/2020

Applicant Business:			
Principal Name	Social Security Number or Tax ID if an Entity	Date of Birth	Place of Birth (City & State or Foreign Country)
		/ /	
Home Address		Home Phone	% of Ownership in the Small Business Applicant
		() -	

Veteran/Gender/Race/Ethnicity data is collected for program reporting purposes only. Disclosure is voluntary and has no bearing on the credit decision.

		Enter Response Below
Veteran	1=Non-Veteran; 2=Veteran; 3=Service-Disabled Veteran; 4=Spouse of Veteran; X=Not Disclosed	
Gender	M=Male; F=Female; X=Not Disclosed	
Race (more than 1 may be selected)	1=American Indian or Alaska Native; 2=Asian; 3=Black or African-American; 4=Native Hawaiian or Pacific Islander; 5=White; X=Not Disclosed	
Ethnicity	H=Hispanic or Latino; N=Not Hispanic or Latino; X=Not Disclosed	

Unless stated otherwise, if any of the questions below are answered "Yes," please provide details on a separate sheet.

#	Question	Yes	No
17	Are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction? (If "Yes," the loan request is not eligible for SBA assistance.)	<input type="checkbox"/>	<input type="checkbox"/>
	Initial here to confirm your response to question 17 →		
18	Have you been arrested in the last 6 months for any criminal offense?	<input type="checkbox"/>	<input type="checkbox"/>
	Initial here to confirm your response to question 18 →		
19	For any criminal offense – other than a minor vehicle violation – have you ever: 1) been convicted; 2) pleaded guilty; 3) pleaded nolo contendere; 4) been placed on pretrial diversion; or 5) been placed on any form of parole or probation (including probation before judgment)?	<input type="checkbox"/>	<input type="checkbox"/>
	Initial here to confirm your response to question 19 →		

If you answer "Yes" to questions 18 or 19, you must complete SBA Form 912, "Statement of Personal History." You will need to furnish details, including dates, location, fines, sentences, level of charge (whether misdemeanor or felony), dates of parole/probation, unpaid fines or penalties, name(s) under which charged, and any other pertinent information. If you answer "Yes" to question 19 and are currently on parole or probation, the loan request is not eligible for SBA assistance.

20	Are you presently suspended, debarred, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency?	<input type="checkbox"/>	<input type="checkbox"/>
21	If you are a 50% or more owner of the Small Business Applicant, are you more than 60 days delinquent on any obligation to pay child support arising under an administrative order, court order, repayment agreement between the holder and a custodial parent, or repayment agreement between the holder and a state agency providing child support enforcement services.	<input type="checkbox"/>	<input type="checkbox"/>
22	<input type="checkbox"/> I am a U.S. Citizen <u>OR</u> <input type="checkbox"/> I have Lawful Permanent Resident status Registration Number: _____ <input type="checkbox"/> I am not a U.S. Citizen or Lawful Permanent Resident Country of Citizenship: _____		
	Initial here to confirm your responses to question 22 →		

23	Do you have any ownership in other businesses which would be defined as an Affiliate in the definition found on page 1? (If "Yes," attach a listing of all businesses and your ownership percentage or position in the business.)	<input type="checkbox"/>	<input type="checkbox"/>
24	Have you, or any business you controlled, ever filed for bankruptcy protection?	<input type="checkbox"/>	<input type="checkbox"/>
25	Are you, or any business you control, presently involved in any legal action (including divorce)?	<input type="checkbox"/>	<input type="checkbox"/>
26	Have you or any business owned or controlled by you ever obtained a direct or guaranteed loan from SBA or any other Federal agency or been a guarantor on such a loan? (This includes student loans.)	<input type="checkbox"/>	<input type="checkbox"/>
	(a) If you answered "Yes" to Question 26, is any of the financing currently delinquent?	<input type="checkbox"/>	<input type="checkbox"/>
	(b) If you answered "Yes" to Question 26, did any of this financing ever default and cause a loss to the Government? (If Yes to (a) or (b) above, please provide Lender with a written explanation.)	<input type="checkbox"/>	<input type="checkbox"/>



SBA 7(a) Borrower Information Form
(Section II: Principal Information)

OMB Control No.: 3245-0348
Expiration Date: 07/31/2020

By Signing Below, You Make the Following Representations, Authorizations, and Certifications

REPRESENTATIONS AND AUTHORIZATIONS

I represent that:

- I have read the Statements Required by Law and Executive Order and I understand them.
- I will comply, whenever applicable, with the hazard insurance, lead-based paint, civil rights or other limitations in this form.
- All SBA loan proceeds will be used only for business related purposes as specified in the loan application.
- To the extent feasible, I will purchase only American-made equipment and products.

I authorize the SBA to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act, as amended.

ACCURACY CERTIFICATION

I certify that the information provided in this application and the information that I have provided in all supporting documents and forms is true and accurate. I realize that the penalty for knowingly making a false statement to obtain a guaranteed loan from SBA is that I may be fined up to \$250,000 and/or be put in jail for up to 5 years under 18 USC § 1001 and if false statements are submitted to a Federally insured institution, I may be fined up to \$1,000,000 and/or be put in jail for up to 30 years under 18 USC § 1014.

Signature

Date

Print Name/Title

Management Resume

or submit a resume

All owners, partners, directors, stockholders and key managers should complete this form or provide separate resume(s). Please fill in all spaces. Use full first, middle, maiden and last names. Please indicate if an item is not applicable.

PERSONAL

First Name:	Middle Name:	Maiden Name:	Last Name:
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EDUCATION (College, university, business or trade school)

School Name & Location:
From/To Dates:
Major:
Did You Graduate?
Type of Degree:

MILITARY SERVICE BACKGROUND Please provide a copy of Form DD214 or a "Certificate of Military Service" (NA Form 13038) to potentially qualify for the SBA's veteran-owned small business advantage.

Branch:
From/To Dates:
Honorable Discharge? Rank at Discharge:

WORK EXPERIENCE

Company Name/Location:
From/To Dates:
Title:
Duties:

Company Name/Location:
From/To Dates:
Title:
Duties:

Company Name/Location:
From/To Dates:
Title:
Duties:

Company Name/Location:
From/To Dates:
Title:
Duties:

Principal(s) Information Form

PREVIOUS SBA OR OTHER FEDERAL GOVERNMENT DEBT

Complete the following if you or any principals or affiliates have: 1) ever requested Government Financing or 2) are delinquent on the repayment of any Federal Debt, including student loans.

Name of Agency	Original Loan Amount	Date of Request (mm-yy)	Approved or Declined	Balance	Current or Past Due

- Have you, any officer of your company, or any firm in which you were a major owner ever been involved in bankruptcy or insolvency proceedings? If yes, please furnish details separately. Yes No
- Have you ever had a property foreclosed upon or made a settlement with creditors? If yes, please furnish details separately. Yes No
- Have you ever had a judgment against you? If yes, please furnish details separately. Yes No
- Are you or your business involved in any pending lawsuits or legal actions? If yes, please furnish details separately. Yes No
- Do you or your spouse or any member of your household, or anyone who owns, manages or directs your business, or their spouses or members of their households, work for the Small Business Administration, Small Business Advisory Council, SCORE, ACE, or a Federal Agency, or the participating lender? If yes, please provide on a separate paper the name and address of the person(s) and the office where employed. Yes No
- Have you ever been disbarred from doing business with the U.S. Government? Yes No
- Are all your business and personal taxes current? Yes No
- Does your business currently engage in Export Trade? Yes No
- Do you plan to begin exporting as a result of this loan? Yes No
- Are you employed by the U.S. Government? Yes No

If "Yes," please provide details: _____

- Are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction? If "Yes," the loan request is not eligible for SBA assistance. Yes No
- Have you been arrested in the last 6 months for any criminal offense? Yes No
- For any criminal offense – other than a minor vehicle violation – have you ever: 1) been convicted; 2) pleaded guilty; 3) pleaded nolo contendere; 4) been placed on pretrial diversion; or 5) been placed on any form of parole or probation (including probation before judgment)? Yes No
- Are you a U.S. Citizen? Yes No
- If "No," are you a Lawful Permanent resident alien? Yes No

Provide Alien Registration Number _____

Signature: _____

Date: _____



United States of America
SMALL BUSINESS ADMINISTRATION
STATEMENT OF PERSONAL HISTORY

Please Read Carefully and Fully Complete: SBA uses Form 912 as one part of its assessment of program eligibility. Please reference SBA Regulations and Standard Operating Procedures if you have any questions about who must submit this form and where to submit it. For further information, please call SBA's Answer Desk at 1-800-U-ASK-SBA (1-800-827-5722), or check SBA's website at www.sba.gov. **DO NOT SEND COMPLETED FORMS TO OMB as this will delay the processing of your application; send forms to the address provided by your lender or SBA representative.**

1a. Name and Address of Applicant (Firm Name)(Street, City, State, ZIP Code and E-mail)		SBA District/Disaster Area Office	
		Amount Applied for (when applicable)	File No. (if known)
1b. Personal Statement of: (State name in full, if no middle name, state (NMN), or if initial only, indicate initial.) List all former names used, and dates each name was used. Use separate sheet if necessary.		2. Give the percentage of ownership in the small business	Social Security No.
First	Middle	3. Date of Birth (Month, day, and year)	
		4. Place of Birth: (City & State or Foreign Country)	

If applicable, Name and Address of participating lender or surety co.	5. U.S. Citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO INITIALS: _____ If no, are you a Lawful Permanent resident alien? <input type="checkbox"/> YES <input type="checkbox"/> NO Alien Registration number _____ If no, country of citizenship: _____
6. Present residence address: From: To: Address: Home Telephone No. (Include Area Code): Business Telephone No. (Include Area Code):	Most recent prior address (omit if over 10 years ago): From: To: Address:

PLEASE SEE REVERSE SIDE FOR EXPLANATION REGARDING DISCLOSURE OF INFORMATION AND THE USES OF SUCH INFORMATION.
YOU MUST INITIAL YOUR RESPONSES TO QUESTIONS 5,7,8 AND 9.
IF YOU ANSWER "YES" TO 7, 8, OR 9, YOU MUST FURNISH DETAILS ON A SEPARATE SHEET. INCLUDE DATES, LOCATION, FINES, SENTENCES, MISDEMEANOR OR FELONY, DATES OF PAROLE/PROBATION, UNPAID FINES OR PENALTIES, NAME(S) UNDER WHICH CHARGED, AND ANY OTHER PERTINENT INFORMATION. AN ARREST OR CONVICTION RECORD WILL NOT NECESSARILY DISQUALIFY YOU; HOWEVER, AN UNTRUTHFUL ANSWER WILL CAUSE YOUR APPLICATION TO BE DENIED AND SUBJECT YOU TO OTHER PENALTIES AS NOTED BELOW.

7. Are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No INITIALS: _____
8. Have you <u>been</u> arrested in the past six months for any criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No INITIALS: _____
9. For any <u>criminal</u> offense – other than a minor vehicle violation – have you ever: 1) been convicted; 2) pleaded guilty; 3) pleaded nolo contendere; 4) been placed on pretrial diversion or 5) been placed on any form of parole or probation (including probation before judgment). <input type="checkbox"/> Yes <input type="checkbox"/> No INITIALS: _____
10. I authorize the Small Business Administration to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act and the Small Business Investment Act.

CAUTION - PENALTIES 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, surety bond, or other program participation. A false statement is punishable under 18 USC 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 USC 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, under 18 USC 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000.

Signature	Title	Date
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Agency Use Only		12. <input type="checkbox"/> Cleared for Processing _____ Date _____ Approving Authority _____
11. <input type="checkbox"/> Fingerprints Waived _____ Date _____ Approving Authority _____	<input type="checkbox"/> Fingerprints Required _____ Date _____ Approving Authority _____	13. <input type="checkbox"/> Request a Character Evaluation _____ Date _____ Approving Authority _____
Date Sent to OPS _____	(Required whenever 7, 8 or 9 are answered "yes" even if cleared for processing.)	

PERSONAL CASH FLOW

Please provide the following information regarding sources and uses of cash during the calendar year and your projections for the current year. If a cash deficit exists, explain how the existing debt or requested debt will be serviced-.

NAME:	
SPOUSE:	

SOURCES OF INCOME/CASH	Current Monthly Income		Annualized
GROSS Salaries, Commissions, Bonuses, or any other income			
GROSS Rents Received on PERSONAL Property			
Dividends			
Interest Income			
Cash distributions from Businesses, Partnerships Joint Ventures Etc.			
Income tax refund			
Other sources of cash (including royalties, other distributions)			
TOTAL CASH RECEIVED	\$0.00		\$0.00
USES OF INCOME/CASH			
Rent/Mortgage on Primary Residence			
Home Equity Loan/Line of Credit			
Rent/Mortgage on Other PERSONAL Property			
Auto Leases /Loans (principal and interest)			
Bank Loans principal and interest			
Other Loans principal and interest			
Credit Card Payments			
Alimony/Child Support			
Estimated Income Taxes			
Estimated Property Taxes			
Other uses of income/cash _____			
TOTAL CASH OUTLAYS	\$0.00		\$0.00
CASH FLOW SURPLUS (DEFICIT)	\$0.00		\$0.00

Applicant Signature

Date

Co-Applicant

Date

Request for Transcript of Tax Return

- ▶ **Do not sign this form unless all applicable lines have been completed.**
- ▶ **Request may be rejected if the form is incomplete or illegible.**
- ▶ **For more information about Form 4506-T, visit www.irs.gov/form4506t.**

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
4 Previous address shown on the last return filed if different from line 3 (see instructions)	
5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.	

Caution: If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

6 Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ _____

- a Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days
- b Account Transcript**, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days
- c Record of Account**, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days

7 Verification of Nonfiling, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days

8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days

Caution: If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9 Year or period requested. Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

| / / | / / | / / | / / |

Caution: Do not sign this form unless all applicable lines have been completed.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.

Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-T. See instructions.

Signature (see instructions)	Date	Phone number of taxpayer on line 1a or 2a
Title (if line 1a above is a corporation, partnership, estate, or trust)		
Spouse's signature	Date	



INVOICE: SBA Funding

262 Highway 36
 Hazlet Twp. NJ 07734
 732-787-9191 Fax: 732-495-7058

TERMS
\$500.00 Fee Due at Loan Application \$500.00 balance due at Loan Approval

Description	Qty	Rate	Total
<p>Our Consulting Fee relates to the consultation and processing of all required documentation for loan submission to our Lender (no cost to pre-qualify) throughout the funding process.</p> <p>Credit Card Information: (no AMEX)</p> <p>Name: _____</p> <p>Address: _____ _____</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Credit Card #: _____</p> <p>Exp. Date _____ CVV: _____</p> <p>Signature _____</p>			<p>\$500.00 now With application (non-refundable)</p> <p>\$500.00 due With Loan Approval</p>
Fee due at this time.		TOTAL	\$ 500.00

ADDENDUM

As part of the services you have requested Diamond Financial Services, Inc. (“DFS”) to provide to you, DFS will assist you in preparing your financial package (the “Loan Package”) to submit on your behalf to prospective direct lenders (“Lenders”) who will consider whether to loan you money in order for you to operate a business (the “Business”). DFS has prepared this Loan Package based on the information you have provided to DFS, including without limitation, your business and living expenses, and on such other information DFS has gathered from similarly situated businesses with whom DFS is familiar, all of which you have reviewed and approved.

DFS MAKES NO WARRANTIES OF ANY KIND OR NATURE REGARDING THE BUSINESS AND/OR THE INFORMATION CONTAINED IN THE LOAN PACKAGE, EXPRESS, IMPLIED OR STATUTORY, INCLUDING, WITHOUT LIMITATION, WARRANTIES OF QUALITY, PERFORMANCE, MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, COURSE OF DEALING, COURSE OF PERFORMANCE OR TRADE USAGE, ALL OF WHICH ARE EXPRESSLY DISCLAIMED AND DFS MAKES NO EARNINGS, SALES, PROFITS, EXPENSES, CASH FLOW OR EARNINGS CLAIMS. DFS MAKES NO OPINION OR GUARANTEE THAT YOU WILL ATTAIN THE LEVEL OF SALES, EXPENSES, PROFITS, CASH FLOW OR EARNINGS LEVELS LISTED BY DFS IN THE LOAN PACKAGE. YOU ARE ENTERING THIS BUSINESS AND UNDERTAKING THE TRANSACTIONS DESCRIBED IN THE LOAN PACKAGE AT YOUR OWN RISK. THE ENTIRE RISK AS TO YOUR OPERATION OF THE BUSINESS AND THE RESULTS OBTAINED THEREFROM IS ASSUMED BY YOU. In no event shall DFS be liable to you or anyone, directly or indirectly, whether in an action in contract or tort, for any direct, indirect, incidental, special and/or consequential damages or damages for any lost profits, use, revenue, data, savings, business information, or any other pecuniary loss you sustain, directly or indirectly, arising in any way, in whole or in part, out of your use thereof, even if DFS had been advised of the possibility of such damage or for any acts or omissions in DFS’ performance of the services or on the part of your agents or employees in connection therewith and the same shall be your obligation and liability . This Agreement shall be governed by and construed in accordance with the laws of the State of North Carolina without giving effect to the conflict of law provisions thereof, and venue and jurisdiction for any disputes in connection herewith shall be proper only in any federal or state court located only in Hazlet Twp., New Jersey.

Corporate Acknowledged and agree as this ____ day of _____ 20____

By _____

Personal Signatures _____

Date _____

This form Must be signed and returned prior to loan submission!