INSIGNIA Financial Services

BUSINESS LOAN APPLICATION

BUSINESS INFORMATION

Legal business name		Business phone	Federal Tax ID# or Social Security #
DBA or Registered name		Date business established	Owned since
Business street address (no P.O. boxes)	City State ZIP		County
Mailing street address (if different)	City State ZIP		Number of employees
State of incorporation	Date incorporated	Business e-mail address	Business fax number

Ownership type:

- ☐ Individual
- ☐ Sole Proprietorship
- ☐ S-Corporation
- ☐ C-Corporation
- ☐ General Partnership
- ☐ Limited Partnership
- ☐ Limited Liability Company
- ☐ Limited Liability Partnership
- ☐ Professional Association
- ☐ Non-profit
- ☐ Other _____

Nature of business:

◯ Manufacturing ◯ Wholesale ◯ Retail ◯ Services ◯ Contractor/Construction ◯ Other _____

Please describe your product/service:_____

OWNER INFORMATION (List all owners below and provide a Personal Financial Statement for each owner)

Name	Ownership %	Title
Name	Ownership %	Title
Name	Ownership %	Title
Name	Ownership %	Title

GUARANTOR INFORMATION (List if different from owners above and provide a Personal Financial Statement for each guarantor)

Name	Relationship to Business/Owners
Name	Relationship to Business/Owners
Name	Relationship to Business/Owners
Name	Relationship to Business/Owners

CREDIT REQUEST INFORMATION

Business Loan Type:	Amount Requested:	Term/Amortization:
☐ Line of Credit	$_____	_____
☐ Term Loan	$_____	_____
☐ Real Estate Loan	$_____	_____
☐ Construction Loan	$_____	_____
☐ Standby Letter of Credit	$_____	_____
☐ Other	$_____	_____

Please provide a brief explanation of how you will use the loan proceeds:

_____

_____

Collateral Description: (Attach detailed list if available)

_____

_____

_____

BUSINESS INFORMATION

	YES	NO
• Does the business applicant or guarantor(s) own 20% or more of another company (If yes, attach tax returns.)	☐	☐
• Has the business applicant used or done business under any other names?	☐	☐
• Does the business applicant or guarantor(s) hold any assets in trust? (If yes, provide a copy of the complete Trust Agreement.)	☐	☐
• Is the business applicant an endorser, guarantor or co-maker for obligations not listed on its financial statements?	☐	☐
• Is the business applicant or any guarantor(s) party to any claim or lawsuit?	☐	☐
• Has the business applicant or any guarantor(s) ever declared bankruptcy?	☐	☐
• Does the business applicant use hazardous substances in the normal course of business?	☐	☐
• Has the business applicant ever failed to comply with any laws, rules or regulations relating to hazardous substances?	☐	☐
• Are there any state or federal tax liens pending or filed against the business applicant or any guarantor(s)?	☐	☐

If you answered "YES" to any of the above questions, please attach an explanation and details of each.

CURRENT DEPOSITORY RELATIONSHIPS

Institution Name	Phone	☐ Checking ☐ Savings	Date Opened	Current Balance
				$
Institution Name	Phone	☐ Checking ☐ Savings	Date Opened	Current Balance
				$
Institution Name	Phone	☐ Checking ☐ Savings	Date Opened	Current Balance
				$

CURRENT LOAN RELATIONSHIPS

Creditor	Type*	Collateral	Interest Rate	Maturity Date	Current Balance	Monthly Payment
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
				Totals	$	$

* Type: Line (L), Term (T), Lease (LE), Other (O)

List on a separate sheet of paper all leases, guaranties, commitments, contingent liabilities or any other obligation not listed above or shown on the financial statements.

AUTHORIZATION/SIGNATURES

* The signer(s) certifies to the designated financial institution ("Lender") and INSIGNIA Financial Services LLC ("INSIGNIA") as its appointed agent that he/she is authorized to execute this Application for the business named above ("Applicant"), and that all information and documents submitted,including financial statements, and federal income tax returns, are true, correct and complete. The signer(s) further agrees to notify INSIGNIA promptly of any material change in any such information. The signer(s) authorizes INSIGNIA to: 1) obtain additional information concerning my financial condition, employment and credit history including without limitation, consumer and/or business reports, inquiries to the Internal Revenue Service or the Franchise Tax Board, in their names as applicant and individuals at any time; 2) furnish such information and share any credit experience with me to others and answer any questions about my credit experience and other financial relationships; 3) disclose account information as required by law. The signer(s) further authorizes INSIGNIA to obtain balance and payoff information on all accounts requiring payoff as a condition of granting credit.

The signer(s) understands and agrees that this application is subject to final approval of Lender and that additional information may be required in order to make a final credit decision. This application and all supporting information including but not limited to financial statements and tax returns shall remain the property of Lender and INSIGNIA. The signer(s) understands it may be a federal crime punishable by a fine and/or imprisonment to knowingly make false statements or provide incomplete or incorrect information on loan applications to financial institutions.

1. _____

Signer Title Date

2. _____

Signer Title Date

3. _____

Signer Title Date

4. _____

Signer Title Date

Adverse Action Notice

(Applicant copy is located on page 3 of this form.)

The Federal Equal Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning INSIGNIA Financial Services LLC is the Chicago Regional Office of the Federal Trade Commission, 55 East Monroe Street, Suite 1437, Chicago, Illinois 60603.

Adverse Action Notice

Applicant's Copy

The Federal Equal Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning INSIGNIA Financial Services, LLC is the Chicago Regional Office of the Federal Trade Commission, 55 East Monroe Street, Suite 1437, Chicago, Illinois 60603.

Applicant: Retain for your records