

### INFORMATION ABOUT YOUR BUSINESS

Legal Business Name/Borrowing Entity ("Company")			Business Tax Identification No.		# of Employees
Type of Business	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership	<input type="checkbox"/> LLC <input type="checkbox"/> LLP	<input type="checkbox"/> S Corporation <input type="checkbox"/> C Corporation	<input type="checkbox"/> Non Profit <input type="checkbox"/> Other	Annual Gross Sales
Street Address	City	County	State	ZIP Code	
Statement Mailing Address (if different from street address)	City	County	State	ZIP Code	
Description of Business (Product/Service provided)			Date Business Established	Current Owner Since	
Primary Contact Name			Business Phone Number ( )	Business Fax Number ( )	E-mail Address

### OWNERS AND GUARANTORS

<p><b>Owner</b> Optional: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss</p> <p>Name: _____</p> <p>Title: _____ Ownership %: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Home Phone: _____</p> <p>Social Security Number/TIN: _____ Annual Gross Personal Income*: \$ _____</p> <p>Monthly Housing Payment: _____ Net Worth Outside of Business: \$ _____</p>	<p><b>Owner</b> Optional: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss</p> <p>Name: _____</p> <p>Title: _____ Ownership %: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Home Phone: _____</p> <p>Social Security Number/TIN: _____ Annual Gross Personal Income*: \$ _____</p> <p>Monthly Housing Payment: _____ Net Worth Outside of Business: \$ _____</p>
<p><b>Owner</b> Optional: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss</p> <p>Name: _____</p> <p>Title: _____ Ownership %: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Home Phone: _____</p> <p>Social Security Number/TIN: _____ Annual Gross Personal Income*: \$ _____</p> <p>Monthly Housing Payment: _____ Net Worth Outside of Business: \$ _____</p>	<p><b>Owner</b> Optional: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss</p> <p>Name: _____</p> <p>Title: _____ Ownership %: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Home Phone: _____</p> <p>Social Security Number/TIN: _____ Annual Gross Personal Income*: \$ _____</p> <p>Monthly Housing Payment: _____ Net Worth Outside of Business: \$ _____</p>

Check here if there are additional owners and/or guarantors and attach a Business Credit Application containing the owner's and/or guarantors' information and signatures.  
 \* Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

### BUSINESS BANK REFERENCES

Type of account (List all that apply)	Average Balance with Home Bank	Average Balances with Other Financial Institutions	Total Average Balance	Name of Other Financial Institution
Business Checking	\$ _____	\$ _____	\$ _____	_____
Business Savings	\$ _____	\$ _____	\$ _____	_____
Business Loans	\$ _____	\$ _____	\$ _____	_____ Monthly Payment \$ _____
Business Lease	\$ _____	\$ _____	\$ _____	_____ Monthly Payment \$ _____

### LOAN REQUEST INFORMATION

Primary Use/Purpose of the Loan \_\_\_\_\_

Amount Requested \$ \_\_\_\_\_

What are your repayment sources? (2 or more) Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Primary \_\_\_\_\_ Secondary \_\_\_\_\_

### COLLATERAL

Description	Date	Source of Value	Reported Value	Cross Pledged?

### OTHER INFORMATION If yes to any of the following question, please explain. (Attach an additional page.)

<b>Please answer the following questions for the business and owner(s):</b>	<b>Business</b>	<b>Personal</b>
1. Are there any claims or lawsuits pending?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are any State or Federal Income, Withholding, Sales or Property taxes delinquent?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Does any liability exist for any amounts via leases, guaranties, commitments or other contingency agreements?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Have there been any bankruptcies or judgments?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Is any collateral offered to Home Bank currently pledged to other creditors?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Are any assets held in a Trust?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

It is understood that this may not be a complete application and that Home Bank may need additional information to properly evaluate the credit request.

### CERTIFICATIONS AND SIGNATURES

The Company and each signer(s), by signing below, jointly and severally and in solido certify that: (i) they understand that this Application is subject to credit approval by Home Bank; (ii) all information furnished to Home Bank herein and to be furnished in connection with this Application as well as all future information is and will be true, accurate and complete and fairly presents the financial condition of Company and the signer(s); and (iii) they agree that any loan would be used for business purposes only, and not for household, personal, family or consumer purposes. Company and the signer(s) authorize Home Bank: (i) to rely upon and verify said credit and business information; (ii) to obtain consumer and/or commercial credit reports on the signer(s) and Company; and (iii) to provide credit information about Home Bank credit experience with the signer(s) and with Company to other creditors and to credit reporting agencies, from time to time.

Each person signing below certifies that: (1) one or more signer(s) is signing in his individual capacity (if a sole proprietorship) or on behalf of Company in the capacity indicated next to the signer(s)' name(s) and that signer(s) is/are authorized to execute this Application on behalf of Company and to bind Company to the terms of the agreements set forth in this Application; and (2) the signers(s) below is a sole proprietor or, for a Company Application, includes all persons owning 25% more of the stock, general partnership interests, or membership interests in Company.

x _____ Applicant Signature(s)	_____ Title	_____ Date	x _____ Applicant Signature(s)	_____ Title	_____ Date
x _____ Applicant Signature(s)	_____ Title	_____ Date	x _____ Applicant Signature(s)	_____ Title	_____ Date

