Small Business Access Partners, Inc.

Company Information

Company name					
Address		City	State		Zip
Principal in charge		Phone ()		Fax_()
Secondary contact person	R)	Phone ()		Fax_()
Type of business			Date esta	ablished _	
Type of entity (check one):	rship Partnership	■ Corporation	LLC		
Company Ownership					
Name		_ Title			% of Ownership
Name		_ Title			% of Ownership
Name		_ Title			% of Ownership
Affiliate Businesses if APPLICABLE					
Name		- Owner	PANY OR INDIVIDUALS)		% of Ownership
Name		_ Owner_	PANY OR INDIVIDUALS)		% of Ownership
If a corporation, please indicate who is President and	Secretary	VII. Eloitti ooiiii	ALL CRIBOTES,		
Existing Business Locations					
Address		Square feet	Lease payment	_	Lease expiration
		Replaced by new fa	•		
Address		_ Square reet Replaced by new fa	Lease payment cility?	_	Lease expiration
References					
Bank name	Acct. no	Acct. of	fficer	Pho	ne
Accountant	Firm name_			Pho	ne
Attorney	Firm name				ne
Trade references		Phone			

Nature of Your Business Nature of your business. Type of products or services (include any catalogs or brochures)_ Geographic market area____ List key customers_ List major competitors_ **Project Information** Street address of project ____ __ State ___ Zip_ County What is the square footage of the new building?____ What is the square footage your company will occupy?*____ * Please note -- We require your company to occupy 51% of an existing building and 60% of a new building. Escrow closing date _ Realtor's name_ Phone_ If known, how will the property be vested (i.e. individually, husband and wife, partnership, LLC, corporation, trust ...) Please provide appropriate document (i.e. Partnership Agreement, LLC documents, Articles of Incorporation, Trust Agreement ...) **Total Project Costs** Purchase existing building **Construction Project** Purchase price _____ \$___ Land acquisition_____ Improvements \$_____\$ Equipment*______\$_ Architects, permits, other soft costs ______ \$_ Other _____\$__ Equipment*_____\$_ TotaL_____\$__ Other______\$_ Total_____\$_ * Please note -- equipment to be financed must have a useful life of 10 years or greater. If there are any tenants that will remain in the building, please provide the following information: Also, please have your realtor provide copies of all existing leases. Tenant name Square footage Lease expiration Rent amount

Business Debt Schedule

Indebtedness: Furnish the following information on all installment debts, contracts, notes, and mortgages payable. Do not include accounts payable or accrued liabilities.

and mortgages payable. Do not include accounts payable or accrued liabilities. Company Name					Date				
Creditor Name/address	Original amount	Original date	Present balance	Interest rate	Maturity date	Monthly payment	Security	Current or delinquent	
Total present balance**				Total monthly payment					

^{*} Should be the same date as current financial statement.

^{**} Total must agree with balance shown on current financial statement.

Em	ployee Questionnaire								
Num	ber of current employees	Estimated number of new	employees	with	hin the next two year	s as a result of this project _			
Key	employees								
Nan	ne	Title	R	Resp	oonsibilities	Years with company	Years in the industry		
Mis	scellaneous Questions								
Have	e you or any officer of your company ever been inve	olved in bankruptcy or insolven	ncy proceedi	lings	3?				
Are	you or your business involved in any pending or pri	or lawsuits?	If yes, p	oleas	se provide details on	a separate sheet.			
	e you ever received a SBA loan?		of the SBA L	Loar	n Authorization Docu	ment and the following:			
Orig	inal Amount \$	Date of	the loan			_			
	ent Balance \$ the applicant business or busnesses owned or cor		-£ (a)				d = h		
	Federal loan, causing a loss to the government (inc					wned, operated or controlled	a busness defaulted		
	If yes, please provide details includ	ng name of agency, loan amou	unt, original	date	e and amount, and th	ne amount of the loss to the	govenment.		
Ch	ecklist								
Bus	iness Information		Pe	erso	nal information (for	each owner of 20% or gre	eater)		
	Business financial statements for the last three years			Personal tax returns for the last three years					
	Projections (if business is less than three years old)			Personal resume (form attached)					
	Interim financial statement dated within the last 45 days		-	Personal financial statement (form attached)					
	Business debt schedule (form attached)		-		Photocopy of driver's license/I.D. card				
	Federal tax returns for the last three years								
	Articles of Incorporation, Amendments thereto, and By-Laws (if corporation) Real estate information								
	Articles of Organization and Operating Agreement (if LLC)				Real Estate Purcha	ase Agreement or settlemen	t sheet		
	Partnership Agreement (if partnership)		-		Construction cost b	cost budget and/or equipment invoices			
	Business License and Fictitious Business Name Statement (if proprietorship)			•	Existing environme	ental studies			
	Franchise Agreement								
Au	thorization to Release Informatio	n							
	e hereby authorize the release to Small Business A	ccess Partners, Inc. of any info	ormation the	ey m	ay require at any tim	e for any purpose related to	my/our credit transaction		
	them. e further authorize Small Business Access Partners	, Inc. to release such information	on to any er	ntity	they deem necessa	ry for any purpose related to	my/our credit transaction		
	them. hereby certify that the enclosed information, inclu-	ding any attachments or exhibit	ts provided l	here	e within or at a later of	date, is valid and correct to t	he		
best	of my/our knowledge.								
Nam	ne of applicant(s)								
Sign	Signature of applicant(s) Date								
Nam	ne of applicant(s)								
Sign	ature of applicant(s)	D:	ate						