

Commercial Customer Profile

This customer profile will enable us to serve your banking needs quickly and efficiently

Company	<u>Information</u>						
	C-Corp			Sub-S Co			
	LLC				Partnership		
	Sole Proprietorship			Other:			
Legal Company Name:							
Trade Name o	or DBA:						
Physical Addre	ess:						
City:		State	:		Zip:		
Primary Conta	nct:	Business Phone:					
Date Establish	ed:	_ Gross Annual Sales	s: \$		Federal Tax ID #:		
					me:		
Name(s) of Accountant:					Phone:		
Addres	ss:						
Name(s) of Att	torney:				_ Phone:		
Addres	ss:						
Business Insur	ance Agency:						
	s:						
Credit Facility R	equested						
Revolving Line of Credit			Amount R	equested: \$			
Straight Line of Credit			Term/Mat	urity:			
Term / Installme	nt Loan		Proposed	Collateral:			
Other							
Purpose of Request							



Management Resume

Please fill in all the spaces, use the full first, middle and maiden names, no initials. If an item is not applicable, please indicate so You may include additional relevant information on a separate exhibit. Sign & date where indicated.

Name:			SS #			
First Middle	Maiden	Last				
Date of Birth:	Place of Birth	Place of Birth:				
Residence Telephone: ()	Business Tele	phone: ()			
Residence Address:						
Street Previous Address:		City	State		Zip	
Street		City	State		Zip	
Lived there from		to				
Month and			Month and			
Spouse's Name:	iddle Maiden		55 #			
Are you employed by the U			ive agency /positi	ion		
Are you a U.S. Citizen? Yes l						
•		-				
Have you ever been charge	•			emeanor in	volving a motor vehic	
violation? Yes □ No □ If y	es, furnish details in a	separate exhibit	:.			
Are you involved in any law	suit at this time or hav	e you ever filed f	for personal or bu	ısiness Ban	kruptcy Protection?	
Yes □ No □ If yes, furnish	details in a separate e	xhibit.				
Have your ever obtained cre	edit under anv other n	ame(s)? Yes □ N	lo∏ If ves furnis	sh details in	a separate exhibit	
-	zanzanaci ariy otner ik	ue(3). 163 <u>—</u> 11	,,	, actans in	a separate exmote.	
EDUCATION						
College or Technical Training. N	ame and Location	Dates Attended Fro	om/To I	Major	Degree or Certificate	
					· · · · · ·	
MILITARY SERVICE BACK						
Branch	From: _	To:	Honorable Di	ischarge? _		
Rank at Discharge	ssignment/accomplishment					
WORK EXPERIENCE						
Company Name/Location _						
Form: To:	Title:					
Duties:						
Company Name/Location $_$						
Form: To:	Title:					
Duties:						
Company Name/Location _						
Form: To:	Title:					
Duties:						



Management Resume – Continued

Business Affiliations

(List all businesses which are totally or partially owned by you or your spouse)

Con	nplete Legal Business Name	% Owned	# of Employees	Type of Business		
_						
				<u> </u>		
	If you are buying the	subject business p	please respond to the nex	t 3 questions.		
	(If no	t, please proceed to "Po	ersonal Declarations" below)			
	Do you have direct industry experience? Yes □ No □					
	, How many years? , in what capacity? Please Descri	be:				
•		_				
	(Augustan and museking & akkada a		eclarations	overthere 1 (1)		
1	(Answer each question & attach as	-				
1.	Are you employed by the U.S. Government?□Yes □ No Are you involved in any claim or lawsuit?□Yes □ No					
2.						
3.	3. Are any of your federal, state or local taxes delinquent?					
4.	1. Have you ever been involved in any bankruptcy or insolvency proceedings? □Yes □ No					
5.	Do you have any outstanding judgements? □Yes □ No					
6.	Have you ever had any property foreclosed upon or given title or deed in lieu of foreclosure? \Box Yes \Box No					
7.	7. Have you ever requested government financing before?(Includes SBA, FHA, VA, Student loans). ☐Yes ☐No					
8.	3. Is this loan request under consideration at any other financial institution at this time? \square Yes \square No					
9.	Are you required to pay alimony or child support?□Yes □ No					
10.	. If you answered "yes" to Q 9 – what is the amount of your annual obligation?\$Total/year					
11.	. Are you currently delinquent with respect to any child support payments?□Yes □ No					
12.	12. Are you a U.S. Citizen? (If no, please complete Immigration and Naturalization Authorization Form) □Yes □ No					
Signatu	re		Date			



Property Information

SUBJECT PROPERTY LOCATION

Street:						
City:		State:			Zip:	
Block:		Lot:			<u></u>	-
CONTACT TO ACC	CESS PROPERTY					
Name:				Phone #:		
□Borrower	☐ Seller	□ Broker		☐ Agent		
TYPE OF REAL EST	TATE					
Commercial:	☐ Auto Repair ☐ Industria	al 🗆 Gas	Station	☐ Retail	☐ Hotel/Mo	otel
☐ Office	☐ Restaurant ☐ Mixed U	se 🗆 Land	d 🗆 0	Other:		
ADDITIONAL INFO						
Lot Size:	Building Size:	No. of Bui	ldings:		No. of Units:	
Stories:	Owner Occupied:	%	Non-Owner Occup		pied:	%
Proposed/ Planne	ed Use:					



2 Year Projections

Borrower Name:	First Year		Second Year
	- Tillot Teal	1	- Condition
Estimated Gross Sales (Business) (Must include a breakdown on a separate sheet, as to how this	volume will be att	ained)	
(Must include a breakdown on a separate sheet, as to now this	voidine will be acc	anicuj	
Less: Cost of Goods Sold:			
Opening Inventory			
Materials			
Direct Labor			
Subcontract Costs			
Purchases			
Overhead			
Less Ending Inventory			
Total Cost of Goods Sold			
Estimated Gross Profit			
Estimated Operating Expenses:			
Officer's Salaries (if Corporation)			
Employee Wages			
Outside Services			
Accounting & Legal Fees			
Rent			
Equipment Leases			
Depreciation			
Supplies			
Utilities			
Telephone			
Proposed Interest			
Other Interest			
Repairs			
Taxes - Payroll			
Taxes - Real Estate			
Insurance			
Advertising			
Bad Debts			
Car, Delivery, Travel			
Miscellaneous (Postage, etc.)			
Total Extimated Expenses			Ï
Net Profit			
Less: Income Taxes			
Net Profit After Taxes			
Less Withdrawals (if Proprietorship/Partnership)			
Net Profit After Withdrawls			

Signature Date



AUTHORIZATION TO RELEASE INFORMATION

Date:	
Borrower / Guarantor Name:	
Address:	
Co-Borrower / Guarantor Name:	
Address:	
TO WHOM IT MAY CONCERN:	
Group. As part of the application proc may verify information contained in m	an and/or other form of credit with Jeganism Business Advisory sess, Jeganism Business Advisory Group or the lender of their choice sy/our loan application, financial statement or other documents either before the loan is closed or as part of its quality control
underwrite my loan and to any investor	o Jeganism Business Advisory Group or any lender they designate to r to whom the lender may sell all or a portion of my loan now or in entation they may request. Such information includes but is not
 Income verification such as pay returns, etc. 	y stubs, w-2 statements, copies of current and/or prior year tax
 Verification of assets including statements, insurance policies, 	bank statements, investment and/or brokerage account etc.
> Employment history including	dates, title, income, hours worked, etc;
	ning date, high credit, payment amount, current balance, and cation (opening date, payment amount and payment record)
> Any other information lender of	deems necessary in connection with the loan request.
the confidential use of the lender, loar financing in determining our credit wor addition, we are aware that the docum	ion after closing for quality assurance need s. This information is for n participants and other agents helping to secure the requested rthiness for the loan or to confirm information we have supplied. In tentation supplied is subject to re-verification after the date the fax copy of this authorization may be deemed to be the equivalent uplicate original.
APPLICANT (S):	
Borrower / Guarantor	Social Security Number / EIN
Co-Borrower / Guarantor	Social Security Number / EIN