



BUSINESS LOAN APPLICATION

Amount of Loan Request \$ _____

TYPE OF LOAN:

- Business Term Business Loan Line of Credit
 Commercial Real Estate Construction Loan Business VISA
 Equipment Vehicle

Applicant's Name _____
 Firm or Trade Name _____
 Business Address _____

TYPE OF OWNERSHIP:

- Sole Proprietor Corporation Limited Liability Corporation
 General Partnership S-Corporation Limited Liability Partnership
 Limited Partnership Nonprofit Other

City _____ State _____ Zip _____ Type of Business _____ Date Established _____
 Telephone (Business) _____ (Residence) _____ Federal Tax I.D. No. _____
 Employed by (If self-employed, kind of business) _____ Position _____ Years _____ Months _____
 Address _____ City _____ State _____ Zip _____

PURPOSE OF LOAN AND TERMS REQUESTED

Purpose: _____

Terms: _____

REPAYMENT PROGRAM

Source of Repayment: _____

COLLATERAL

Description: _____

TO BE COMPLETED BY CORPORATION OR PARTNERSHIP

OFFICER OR PARTNER NAMES*	OFFICIAL TITLE (if any)	INTEREST IN BUSINESS	PERSONAL WORTH OUTSIDE OF BUSINESS
1.		%	\$
2.		%	\$
3.		%	\$

*NOTE: If there are more than two owners with an interest greater than 20%, please complete personal info on a separate application.

OWNER, PARTNER OR MAJOR SHAREHOLDER PLEASE COMPLETE THIS SECTION

FULL NAME		SOCIAL SECURITY NUMBER		BIRTHDATE	
HOME ADDRESS	CITY	STATE	ZIP	YRS./MOS.	HOME PHONE
EMPLOYED BY (if self employed, kind of business)			POSITION	YRS./MOS.	BUSINESS PHONE
STREET ADDRESS	CITY	STATE	ZIP	LABOR UNION/LOCAL NO.	

OWNER, PARTNER OR MAJOR SHAREHOLDER PLEASE COMPLETE THIS SECTION

FULL NAME		SOCIAL SECURITY NUMBER		BIRTHDATE	
HOME ADDRESS	CITY	STATE	ZIP	YRS./MOS.	HOME PHONE
EMPLOYED BY (if self employed, kind of business)			POSITION	YRS./MOS.	BUSINESS PHONE
STREET ADDRESS	CITY	STATE	ZIP	LABOR UNION/LOCAL NO.	

Please complete additional information and sign on reverse.

CURRENT BANKING RELATIONSHIP				
TYPE	BANK NAME	ACCOUNT NUMBER	MATURITY STATUS	YEARS ESTABLISHED
CHECKING				
LOAN(S)				
PAYROLL				
VISA/MC				

LIST ALL CONTINGENT LIABILITIES/LOANS GUARANTEED FOR PARTNERSHIPS/CORPORATIONS/OTHERS			
BORROWING ENTITY/NAME	PROJECT	LENDER	LOAN BALANCE/GUARANTY
1.			
2.			
3.			
4.			
5.			

FOR CONTRACTORS/DEVELOPERS ONLY					
PLEASE COMPLETE THE FOLLOWING LISTING OF ALL PRESENT PROJECTS UNDER WAY					
PROJECT NAME	LOCATION	TYPE	STATUS	LENDER	PHONE NUMBER
1.					
2.					
3.					
4.					

CREDIT REFERENCES			
CREDITOR/SUPPLIER	ADDRESS	BALANCE OWING	TERMS
1.			
2.			
3.			
4.			

AUTHORIZATION: Each person or entity signing this application or an Application addendum Form ("Signer") certifies that all information provided by the Signer is true and complete and authorizes *Bank of Alameda* to 1) obtain credit and employment information about Signer, 2) obtain credit reports and make any inquiries, from time to time that *Bank of Alameda* considers appropriate in connection with this application or review of this loan account, 3) make information from this application (including other signers), loan account experience, and any other account information available, as required by law to credit bureaus. Each Signer acknowledges that additional information may be required in order to make a final credit decision. Applicant also acknowledges receipt of the Equal Credit Disclosures provided with this application.

REQUIRED SIGNERS: This application must be signed as follows: **CORPORATION**, the President or the Chairman of the Board or any Vice President and one of the following: Secretary, Assistant Secretary, Chief Financial Officer or Assistant Treasurer; **PARTNERSHIP**, all general partners; **SOLE PROPRIETORSHIP**, the owner; **LIMITED LIABILITY COMPANY**, all members or managers; **UNINCORPORATED ASSOCIATION**, all members.

PRINT LEGAL NAME OF BUSINESS APPLICANT

X
 AUTHORIZED SIGNATURE _____ PRINT NAME _____ TITLE _____ DATE _____

X
 AUTHORIZED SIGNATURE _____ PRINT NAME _____ TITLE _____ DATE _____

X
 AUTHORIZED SIGNATURE _____ PRINT NAME _____ TITLE _____ DATE _____

Signatures of Guarantors: (Each Shareholder, Partner, or Member owning 20 percent or more interest in the Business, sign below.)

X AUTHORIZED SIGNATURE _____ PRINT NAME _____ DATE _____

X AUTHORIZED SIGNATURE _____ PRINT NAME _____ DATE _____

X AUTHORIZED SIGNATURE _____ PRINT NAME _____ DATE _____

X AUTHORIZED SIGNATURE _____ PRINT NAME _____ DATE _____

X AUTHORIZED SIGNATURE _____ PRINT NAME _____ DATE _____

X AUTHORIZED SIGNATURE _____ PRINT NAME _____ DATE _____

Bank of Alameda

P.O. Drawer F, Alameda, CA 94501 • (510) 864-9100 • Fax (510) 864-6068

MEMBER FDIC