



## Business Loan Application

**Important Information About Procedures for Opening a New Account:** To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. **What This Means for You:** When you open an account, we will ask you for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

___ Line of Credit    ___ Commercial Real Estate Mortgage    ___ Term Loan    ___ Equipment Financing				
Specifics of Loan Request				
Amount of Request: \$ _____		Term (No. Months) Requested: _____		Business Member Account Number: _____
Purpose/Use of Funds: _____				
Collateral: _____				
Company Information				
Business Name: _____			DBA Name: _____	
Street: _____	City: _____	County: _____	State: _____	Zip: _____
Telephone Number: _____			Fax Number: _____	
Website Address: _____			Email Address: _____	
Legal Status: ___ Partnership    ___ "C" Corporation    ___ "S" Corporation    ___ LLC    ___ Sole Proprietorship    State of Incorporation/Organization: _____				
Nature of Business: _____				
Tax I.D. Number: _____	Date Business Established: _____	Present Management Since: _____	# of Locations: _____	# of Employees: _____
Company Financial Information				
Most Recent Year's Tax Return: _____		Gross Revenue: _____		Ordinary Business Income (Loss): _____
Depreciation Expense: _____		Interest Expense: _____		Officer's Compensation: _____
Total Assets: _____		Total Liabilities: _____		Net Worth/Equity: _____
Miscellaneous Information				
Has the business or any principal/owner ever declared bankruptcy?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the business or any principal/owner a party to any tax lien or lawsuit?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the business incurred a loss in any of the past 3 years?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any delinquent State or Federal taxes owed by the business?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the business for sale or under agreement that would change the ownership of the business?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the business changed names in the past 5 years?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are any of the business assets pledged as collateral for any loan?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the business or principal/owner ever settled a debt for less than the amount owed?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
IF YOU ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, PLEASE ATTACH DETAILS				
Are all principals/owners US citizens? (If not, please provide us with the number and a copy of your alien registration card) _____			<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Owner/Guarantor Information (for all principals with 20% or greater ownership interest)**

1) Name (First, MI, Last):		Title:	% Ownership:	Date of Birth:
Street Address:		Social Security Number:	Email Address	
City:	State:	Zip:	Home Phone: ( )	Cell Phone: ( )
Other Information:				

2) Name (First, MI, Last):		Title:	% Ownership:	Date of Birth:
Street Address:		Social Security Number:	Email Address	
City:	State:	Zip:	Home Phone: ( )	Cell Phone: ( )
Other Information:				

3) Name (First, MI, Last):		Title:	% Ownership:	Date of Birth:
Street Address:		Social Security Number:	Email Address	
City:	State:	Zip:	Home Phone: ( )	Cell Phone: ( )
Other Information:				

4) Name (First, MI, Last):		Title:	% Ownership:	Date of Birth:
Street Address:		Social Security Number:	Email Address	
City:	State:	Zip:	Home Phone: ( )	Cell Phone: ( )
Other Information:				

**Required Signatures**

**Representation and Warranties**—The information contained in this statement is provided with the intent of the undersigned to establish, modify or otherwise maintain an extension of credit from the credit union. The undersigned acknowledges and understands that the credit union is relying on information provided herein in deciding to grant or continue credit to the undersigned. Each of the undersigned represents warrants and certifies that the information provided herein is true, correct and complete including all documents required to be submitted in connection herewith, including federal income tax returns. Each of the undersigned agrees to notify the credit union immediately and in writing of any change in name, address, or employment and of any material adverse changes (1) in any of the information contained in the statement or (2) in the financial condition of any undersigned or (3) in the ability of any of the undersigned to perform its (or your) obligations to the credit union. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify the credit union as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, we may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. The credit union is authorized to make all inquiries we deem necessary to verify the accuracy of the information herein and to determine the creditworthiness of the undersigned including the Internal Revenue Service and credit reporting agencies. The undersigned authorize any person or consumer reporting agency to give information about our credit experience with the undersigned. The undersigned further gives permission to NWFUCU to share information in this loan application with any federal, state or other authorities and/or lenders for the purpose of processing this loan application and authorize NWFUCU to verify your identity. As long as any obligation or guarantee of the undersigned to the credit union is outstanding, the undersigned shall supply annually an updated financial statement. This personal financial statement and any other financial information that the undersigned gives us shall be credit union property. The undersigned hereby authorizes NWFUCU to initiate debit entries to any NWFUCU account of the borrower for the scheduled payments on the credit extension, or renewal thereof, arising from this application.

**Commercial Use**—Commercial Use: The undersigned certifies that any property and/or proceeds from the proposed request will be used by the applicant for commercial purpose only and not for any personal, family or household purposes, and that the proposed request would constitute a business loan which is exempted from the disclosure requirements of Regulation Z – Truth in Lending Act. The applicant agrees to indemnify and hold lender harmless from any and all claims, loss or damage resulting or caused by the request being subject to any of the provisions of the federal Consumer Credit Protection Act (Truth-in-Lending Act) and Regulation Z. The undersigned certifies that he/she has full authority to act on behalf of applicant in connection with the above referenced credit request.

**Permission to Obtain a Credit Report**—You authorize us to verify the information you submitted and to obtain credit reports concerning you. Upon your request, we will tell you if a credit report was obtained and give you the name and address of the credit reporting agency that provided the report. You warrant to us that the information you are submitting is true and correct. By submitting this application, you agree to allow us to receive the information contained in your application, as well as the status of your application.

**Equal Credit Opportunity Act Notice**—The Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that 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 this credit union is: **National Credit Union Administration, Office of Consumer Protection (OCP), Division of Consumer Compliance and Outreach (DCCO)**, 1775 Duke Street, Alexandria, VA 22314. Phone - (703) 518-1141; Fax - (703) 837-2460.

**Right to Statement of Denial**—If NWFUCU denies your application for credit, you have the right to a written statement of the specific reasons for the denial. To obtain the statement please contact NWFUCU, Business Services, 200 Spring Street, Herndon, VA 20170 or by phone at 703-709-8901 within sixty (60) days from the date you were notified of the Credit Union's decision. NWFUCU will send you a written statement of reasons for the denial within thirty (30) days of receiving your request.

Applicant Signature	Printed Name and Title	Date
Guarantor Signature (Required)	Printed Name	Date
Guarantor Signature (Required)	Printed Name	Date
Guarantor Signature (Required)	Printed Name	Date
Guarantor Signature (Required)	Printed Name	Date